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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RIDES FOR YOU AUTO SALES LLC

Certificate of Status	0
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Page Count	04
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HARRIS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIDES FOR YOU AUTO SALES LLC		
(Name of the Limited Liability (A Florida)	Company as it now appears on our rec Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 1/21/2016	and assigned
Florida document number L16000014911	~··.	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "I	CLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRI	ESS)	7.5
		LEC 6
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Parkana na nama man ndijiran na di dinanana difi naman biran kalina.		
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		70 D (74)
		RA -
3. If amending the registered agent and/or registe	ered office address on our reco	rds, enter the name of the ne
egistered agent and/or the new registered office addre	ess nere:	
Name of New Registered Agent:		
New Registered Office Address:	•	
	Enter Florida street add	dress
		Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent;

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	DWELLY J. BROWN, JR.	5321 TREIG LANE	
		WOOL CY ON DOY DO COOLS	- Add
		WESLEY CHAPEL, FL 33545	Remové
			☐ Change
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E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursu Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the Ohn The 90th day after the record is filed.		11.000.00.00	tach additional sheets, if nec	m, onto onnago(o) nor o	g any other intormation	At hincitank an
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		.7			4 9, 2016	Dated May
DI/L		SEC			12/16	O
Signature of a member or authorized representative of a member DWBLLY J. BROWN, JR.	<u> </u>				- Ciar	_