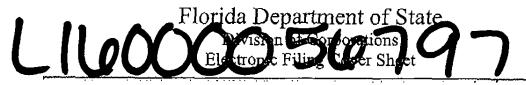
4/11/2016

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

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<b>Email</b>	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ONLY USED TRUCKS LAKELAND, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ONLY USED TRUCKS LAKELAND, LLC	
(Name of the Limited Liability Company as it now approximately Company (A Florida Limited Liability Company)	pears on our records.) ly)
The Articles of Organization for this Limited Liability Company were filed on	03/21/2016 and assigned
Florida document number L16000056797	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>/ here</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the	he designation "LLC" or the abbreviation "L L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	<b>三</b>
<u> </u>	27 27 27 27 27 27
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	39 PATE DA
3. If amending the registered agent and/or registered office address	on our records, enter the name of the
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
Enter i	Florida street address
	, Florida
City	Zip Code

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>	<u>Address</u>		Type of Action
AMBR	CARLO RENDA	357 KELLY DRIVE		
		WEST PALM BEACH, FL 33411		Remove
			·	Change
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If amending my other inform	ation, <del>cater cha</del> n	ge(s) here: (Anach	additional sheets,	if necessary.)	
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Effective date, if other than the if meffective date is listed, the date in Note: If the date inserted in this laborances,'s effective date on the	olock does not meet	the applicable statuto	ng or more than 90 de ry filing requiremen	(optional) ys after filing.) Pursu us, this date will no	art to 605.0207 ( ot be listed as t
ne record specifies a delaye The 90th day after the re	ed effective date cord is filed.	e, but not an effec	ttive time, at 12	1:01 a.m. on th	e earlier of:
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Q.	2/5			SEU: ALLI	5
	Signature of a mem	ber or authorized repres	entative of a member	25. 25.	ਨ -
ASBEL PEREZ VICII		oed or printed name of a		<u> 44</u>	;""
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		Page 3 of 3		TAI OR	မှ 🛴 မ

Filing Fee: \$25.00