L16000073568

(Re	equestor's Name)	-
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PICK-UP	MAIT	MAIL
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Automotive Remarketing of Florida LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following
Richard P. HARRIS
Firm Company
1701 PinehureT Rel 17A
Duvie Din FZ. 34698 City/State and Zip Code
RPH1@Bellseth. 1Vet temail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard Harris at (772) 539-1550 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
L1 \$25.00 Filing Fee \$\text{U \ \$30.00 Filing Fee & Certificate of Status}\$\text{Certified Copy tadditional copy is enclosed}\$\text{Certified Copy tadditional copy is enclosed}\$\text{Certified Copy tadditional copy is enclosed}\$\text{Certified Copy}\$\text{Tertified Copy}\$Tertifie

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AUTOMOTIVE REMARKETI (Name of the Limited Liability Compa (A Florida Limited I	invasit now appears on our lability Company)	JA ZZC
The Articles of Organization for this Limited Liability Company Florida document number 216000073568	were filed on 4/13	5 / 2016 _ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab TNS PECTION SerVICES The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	UN/17172d Tity Company," the designation 1701 PINE	LLC" or the abbreviation "LLC." hunst Rol #17A F2-34698
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAMe.	as Abour
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, j	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
	City	. Florida 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 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
MGR	Richard P. I-larenis	1701 Pinehunst Rd #17A Dunedin FE. 34698	<u>- Add</u>
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			□Remove
			(DChange
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an effective date is listed, th ote: Af the date inserted	han the date of filing:	he applicable statutory f	(option or more than 90 days after fil iling requirements, this d	ing.) Pursuant to 605.0207
record specifies a delayer Lis filed.	d effective date, but not an el	ffective time, at 12:01 a.	m, on the earlier of: (b)	The 90th day after the
ated 1/30/2	1/1/-	per or authorized representa	ilive of a member	<u>-</u>
	Richard P.	, //	_	