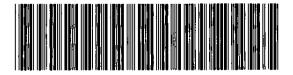
# LILOO

(Requestor's Name)	
(Address)	
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PICK-UP WAIT	MAIL
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**CAPITAL CONNECTION, INC.**417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

EMANS AUTO, LLC	
	A d of the File
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status  Certificate of Fictitious Name
i	Corp Record Search  Officer Search
i	Fictitious Search
	Ficitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by: Seth	UCC 1 or 3 File
08/24/16	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

### **COVER LETTER**

Division of Corporations
SUBJECT: EMANS AUTO, LLE 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:
Enrique Mancera. Name of Person
EMANS AUTO ILE
Firm/Company
3424 Su 3rd St Address
Cape Coral, FL 33991 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Engle Mancera at (239) 309 - 954  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee,  Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

**Registration Section** 

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EMANS AUTO, LLC

(Name of the Limited Liability Compar (A Florida Limited L	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on May 23,	2016 and assigned
Florida document number <u>L 16000099813</u>	the sof Organization for this Limited Liability Company were filed on May 23, 2016 and assigned occument number 16000000000000000000000000000000000000	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	tity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		AS =
Enter new mailing address, if applicable:		
- · · · · · · · · · · · · · · · · · · ·		1 2 3
Carried Marie Control of the Control		( 3 × 2
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, :	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·
		da
	City	Zin 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

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Enrique Mancera		🗀 Add
	•		□ Remove
		Change Title from "DWNER" AMBR	70 ⊠ Change
		ITPIER	[7] Add
			□ Remove
			Change
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Note: If the dat	te inserted in this block o	locs not meet the ap	oplicable statutory f	or more than 90 days are iling requirements, th	ter filing.) Pursuant to 605 his date will not be liste	o.026
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The 90th d	ay after the record	is filed.				
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Dated	Sign	attre of a member or	authorized representa	tive of a member	#5 P 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Filing Fee: \$25.00