

L16 000 130451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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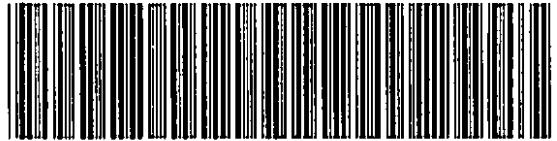
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C N L AUTO SALES 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:

CESAR FLETE ALMONTE

Name of Person

C N L AUTO SALES LLC

Firm/Company

1014 W CENTRAL BLVD

Address

ORLANDO, FLORIDA 32805

City/State and Zip Code

CNLAUTOSALES@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

C ESAR FLETE ALMONTE

407

719-7476

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
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**

C N L AUTO SALES LLC

(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 07/11/2016 and assigned
Florida document number L16000130451.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

C&A AUTO SALES L.L.C.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1014 W CENTRAL BLVD

ORLANDO, FL 32805

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

824 STARLIGHT COVE RD 207

ORLANDO, FL 32828

2020 MAY 13 PM 12:05

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 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>	<u>Type of Action</u>
AMBR	JHANNA TEJADA	824 STARLIGHT COVE RD 207	☒ Add
		ORLANDO, FL 32828	☐ Remove
			☐ Change
AMBR	EDICER SANTIAGO	824 STARLIGHT COVE RD 207	☒ Add
		ORLANDO, FL 32828	☐ Remove
			☐ Change
AMBR	ARNOLDO PERALTA SOLANO	824 STARLIGHT COVE RD 207	☒ Add
		ORLANDO, FL 32828	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Add
			☐ Remove
			☐ Change

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(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.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated MAY. 11 2020

11 _____ 2020 _____



Signature of a member of _____

Signature of a member or authorized representative of a member

CESAR FLETE ALMONTE

Typed or printed name of signee