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S. YOUNG

# **COVER LETTER**

TO:	Registration Se Division of Cor				
		/ ;	J'S Autos LLC.		
SUBJ	ECT:	Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		ع	SHANN BONDHOFF		
			Name of Person		
			CAR City		
		***	Firm/Company		
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			City/State and Zip Code		PH P
		E-mail address: (	(1+4 3 P Gmaik. to be used for future annual report notif	(CM)	5: <b>9</b>
For fur	ther information c	oncerning this matter, please ca	all:		- T-
·	Name o	at Arry Blow-	at ( <u>561</u> ) <u>688</u> Area Code Daytime	- 188 O  Telephone Number	
Enclos	ed is a check for the	he following amount:			
<b>Z</b> \$2	5.00 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 St Certified Copy (additional copy is e	atus &
	0.4 - 11	INC ADDDESS.	CTD CET/COUDI	ED ANNBUCC.	

#### 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

	itos, LLC	our records	
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	Liability Company)	i our records.)	
The Articles of Organization for this Limited Liability Company Florida document number	y were filed on	9/15/16	and assigned
This amendment is submitted to amend the following:		la	
A. If amending name, enter the new name of the limited lia	bility company here:	$\mathcal{N}^{\mathcal{N}}$	
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the desig	nation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:		1	
(Principal office address MUST BE A STREET ADDRESS)		NA	5 FA
Enter new mailing address, if applicable:			PM 5
(Mailing address MAY BE A POST OFFICE BOX)		WA	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he		ur records, <u>enter t</u>	he name of the new
Name of New Registered Agent:		NA	
New Registered Office Address:	Enter Florida .	street address	
		. Florida	
	City	, # 1011464	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
MGR	Jason Dennis	1017 montrico Dr.	Add
		Bock arton Fl. 33437	TRemove
			Change
	· · · · · · · · · · · · · · · · · · ·		🗖 Add
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ocument's e	effective date on the Department of State's records.	
record s	specifies a delayed effective date, but not an effective tir	me at 12:01 a.m. on the earlier
	h day after the record is filed.	ne, at 12.01 dishi on the camer
ated	11/15/16	
	Signature of a member or authorized representative of	f a member

Page 3 of 3

Filing Fee: \$25.00

## **Detail by Entity Name**

Florida Limited Liability Company L & J'S AUTOS LLC.

#### Filing Information

**Document Number** 

L16000172952

FEI/EIN Number

NONE

**Date Filed** 

09/15/2016

**Effective Date** 

09/14/2016

State

FL

Status -

**ACTIVE** 

Principal Address

417 S MILITARY TRL,

WEST PALM BEACH, FL 33415

**Mailing Address** 

7017 MONTRICO DRIVE

BOCA RATON, FL 33433

Registered Agent Name & Address

KRON, IVAN

7017 MONTRICO DRIVE

BOCA RATON, FL 33433

Authorized Person(s) Detail

Name & Address

∵title MGR

DENNIS, JASON T

7017 N. TRICO DRIVE

BOCA RATON, FL 33433

Title MGR

BONDROFF, SHAWN C

7 CHELLIS CT

OWINGS MILLS, MD 21136

**Annual Reports** 

No Annual Reports Filed

**Document Images** 

09/15/2016 -- Florida Limited Liability

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