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D. SCOTT NOV 2 2 2016

COVER LETTER

TO:	Registration Se Division of Cor		•			
·.		OSE AUTO SALES & DETA	ILS LLĊ			
SUBJEC	JI:	Name of Lim	ited Liability Company			
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ndence concerning this matter	to the following:			
		RITA JAIMAN				
			Name of Person			
		RUSSELLROSE AUTO SA	ALES & DETAILS LLC			
			Firm/Company			
		6266 118TH AVE NORTH	-1			
			Address			
		LARGO, FLORIDA 3377.	3			
		E-mail address: (City/State and Zip Code Ritaintouch @ to be used for future annual repo	quail Com	!	
For furth	er information c	oncerning this matter, please ca	all:		SECRITALLA	 4.
RITA J	AIMAN		727 831-6: at ()	508	DV 21	FILE
Enclosed		f Person ne following amount:		Daytime Telephone Number	OF STATE	ED
■ \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certified	te of Status &	

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

RUSSEL ROSE AUTO SALES & DETAILS LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) and assigned Florida document number L16000192616 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RUSSELL ROSE AUTO SALES & DETAILS, The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 6266 118TH AVE. NORTH UNIT 5 Enter new principal offices address, if applicable: LARGO, FL 33773 (Principal office address MUST BE A STREET ADDRESS) 3700 9TH AVE, NORTH B 21 Enter new mailing address, if applicable: SAINT PETERSBURG, FL 33713 (Mailing address MAY BE A POST OFFICE BOX) 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 Florida

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.

City

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 = Mar AMBR = Aut	nager horized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
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Filing Fee: \$25.00