## (·LILONO0333793

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## **COVER LETTER**

Division of Corpo	rations		
SUBJECT:	JBR Auto	o Sales, Llc	
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
		Stephanie Ballesteros	
		Name of Person	
		JBR Auto Sales, Llc	
		Firm/Company	
		106 W. Seneca Ave. Ste # 52	
		Address	
		Tampa, FL. 33612	
		City/State and Zip Code	111111111111111111111111111111111111111
_		roberto-hanna@live.com	
	E-mail address: (	to be used for future annual report notifica	ition)
For further information cond	erning this matter, please ca	all:	
Stephanie	Ballesteros	813 895-4380	
Name of Pe	erson	Area Code Daytime T	elephone Number
Enclosed is a check for the f	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:

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

JBR Auto Sales, Llc		
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Company were filed on _	12/29/2016	_ and assigned
Florida document number L16000233793 .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company b	here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:	1 775 1 223 1 2 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
Principal office address MUST BE A STREET ADDRESS)		Services Contracts
	in distriction	<u> </u>
Enter new mailing address, if applicable:	OR A	
Mailing address MAY BE A POST OFFICE BOX)	Omi A	φ
B. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here:	on our records, <u>enter th</u>	e name of the n
Name of New Registered Agent:		
New Registered Office Address:		
Enter Flo	orida street address	
<del></del>	, Florida	
City		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	Stephanie Ballesteros	2837 Butterfly Landing Dr.	Add
		Land O Lake, FL. 34638	□ Remove
			☐ Change
AMBR	Roberto Luis Hanna Mendoza	100 West Davis Blvd.	<b>■</b> Add
		Tampa, FL. 33606	□ Remove
			☐ Change
AMBR	Stephanic Ballesteros	2837 Butterfly Landing Dr.	<b></b>
		Land O Lake, FL 34638	Remove
			□ Change
			□ Add
			Remove
			□ Change
			□ Remove
			□ Change
			AND D D Bemove
			Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.) s change can take place immediately.
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f an et Note <u>:</u>	e date, if other than the date of filing:
e re The	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 0th day after the record is filed. $^\circ$
Dated	January, 11 2017
	Signature of a member or authorized representative of a member
	* Proberto Hours M.
	Typed or printed name of signee

Filing Fee: \$25.00