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Certified Copies	Certificate:	s of Status
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## **COVER LETTER**

то:	Divis		orporations			
SUBJ	јест:	EUROSPI	EC AUTOWERKS LLC			
		Nan	ne of Florida Limited Part	nership or Limited	Liability	Limited Partnership
The e	nclosed	l Certific	ate of Amendment an	d fee(s) are sub	mitted f	or filing.
Please	e returr	all corre	spondence concernin	g this matter to:		
ADRI	ANNE N	MOORE .				
	•		Contact Person		<del></del>	
EURO	SPEC A	UTOWER	<del></del>		_	
			Firm/Company			
2840 \	WORTH	AVE, UN	-,	· · · · · · · · · · · · · · · · · · ·	<del></del>	
			Address			
ENGL	EWOO	D, FL 3422			_	
51.15	oanna		ty, State and Zip Code			
			KS@GMAIL.COM  oc used for future annual i		_	
E	-maii ad	aress: (to t	oe used for future annual i	eport notification)		
For fu	ırther i	nformatic	on concerning this ma	tter, please call:		
ADRL	ANNE N	<b>MOORE</b>		at ( 941	270-3	451
	Name	of Contac	t Person		nd Dayti	me Telephone Number
Enclo	sed is a	check fo	or the following amou	int:		
<b>\$</b> 52	2.50 Filir	ng Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing and Certified Co		☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Regist Divisi Clifto 2661	tration ion of ( n Build Execut	DDRESS Section Corporation ling ive Center FL 3230	ons er Circle	Regist Divisi P. O. I	ration S on of Co Box 632	orporations



February 21, 2018

ADRIANNE MOORE 2840 WORTH AVE UNIT 5 ENGLEWOOD, FL 34224

SUBJECT: EUROSPEC AUTOWERKS LLC

Ref. Number: L17000024566

We have received your document for EUROSPEC AUTOWERKS LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Partnership, but your entity is a llc. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 718A00003653

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida	Y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	company were filed on $\frac{\sqrt{3}}{\sqrt{17}}$ and assigned
This amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liability company here:  e new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."	
The new name must be distinguishable and contain the words "Limi	ted 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 ADDR.	ESS)
	•
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	ess here:
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
	Enter Florida street address
	, 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
AMBR	TYLER MAJKA	7809 PINEDALE DR	Add
		PORT CHARLOTTE, FL 3398	Remove
			Change
			Add
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f an effec <b>Note:</b> H	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date	) Pursuan Will not	be liste	.0207 ed as
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Filing Fee: \$25.00