## L17000028846

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## **COVER LETTER**

	ion Section of Corporations		
	Auto Part LLC		
SUBJECT:	Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Artic	les of Amendment and fee(s) are sub	omitted for filing.	
Please return all co	rrespondence concerning this matter	to the following:	
	Zeev Belilty		
		Name of Person	11.59.11.51.
		Firm/Company	
	669 NE 191 ST		
		Address	
	Miami, FI 33179		
	mgautopart26@gmail.com	City/State and Zip Code	<u>.                                      </u>
	E-mail address: (	to be used for future annual report not	diffication)
For further informa	tion concerning this matter, please c	all:	
Zeev Belilty		754 208-9471	
<u> </u>	lame of Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check	c for the following amount:		
□ \$25.00 Filing F	Fee S30.00 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 A		Street Address:	aatian
	tion Section of Corporations	Registration So Division of Co	
P.O. Box	-	The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mary Strain Stra

MG Auto Part LLC	ું: ુ:				
(Name of the Limited I (A F	Jability Company as it now appears on our records.) Florida Limited Liability Company)				
The Articles of Organization for this Limited Liabi Florida document number L17000028846	lity Company were filed on $\frac{02/02/2017}{}$ and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the	e limited liability company here:				
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	(DDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO	<u></u>				
B. If amending the registered agent and/or registered affice address h	stered office address on our records, <u>enter the name of the new registered</u> <u>tere</u> :				
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address				
	Florid.				
-	, 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.

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>	Type of Action
AMBR	Zeev Belilty	669 NE 191 St, Miami, Fl 33179	□Add
			Change
			□Remove
			Change
			□Remove
			☐ Change
			□Add
			□Remove
			Change
			□Add
			Remove
			Change
			□Add
			Remove

□Change

Zeev Belilty resigned from MG	Auto Part LLC on August 27,2021 through document dully executed by all parties.
- · <del></del>	
-	
-	
<b>Tective date, if other than the d</b> in effective date is listed, the date must bote: If the date inserted in this bloc beament's effective date on the Dep	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 ok does not meet the applicable statutory filing requirements, this date will not be listed a
	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
is filed.	2021
is filed.	2021
is filed.  September 3	ignature of a member of authorized representative of a member