

L17000048509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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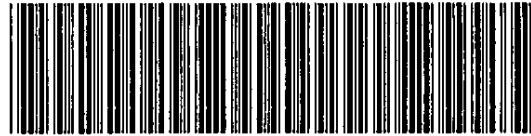
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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D. BRUCE
MAY 01 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAJOR WORLD AUTO LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARVIN SMITH

Name of Person

MAJOR WORLD AUTO LLC

Firm/Company

6630 NORTH ORANGE BLOSSOM TRL UNIT D

Address

ORLANDO FL 32810

City/State and Zip Code

MAJORWORLD37@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARVIN SMITH

Name of Person

321

at ()

Area Code

4367161

Daytime Telephone Number

Enclosed is a check for the 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:

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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MAJOR WORLD AUTO LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/01/2017 and assigned
Florida document number L17000048509.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

1365 BENNETT DRIVE UNIT 125

LONGWOOD FLORIDA 32750

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6630 NORTH ORANGE BLOSSOM TRL

UNIT D

ORLANDO FLORIDA 32810

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:

N/A

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MARVIN SMITH	6630 N ORANGE BLOSSOM TL	<input checked="" type="checkbox"/> Add
		UINT D	<input type="checkbox"/> Remove
		ORLANDO FL 32810	<input type="checkbox"/> Change
MGR	SIMMS YEBOAH	803 RENAISSANCE POINTE	<input checked="" type="checkbox"/> Add
		APT 304	<input type="checkbox"/> Remove
		ALTAMONTE SPRINGS FL	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Dated APRIL 26, 2017.

man Law

Typed or printed name of signee