L17000059385

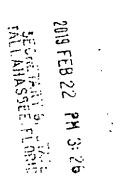
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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:	AutoBizBrokers of Florida		
	Name of Lim	ited Liability Company	2018 FEB 22 12 AHAS
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Sandra Krause		<u> </u>
	AutoBizBrokers, LLC	Name of Person	
	4213 Moccasin Trail	Firm/Company	
	Woodstock, GA 30189	Address	
	Sandra@AutoBizBrokers		
For further information	E-mail address: (concerning this matter, please concerning this matter)	to be used for future annual report not all:	ilication)
Sandra Krause		770 885.3715	
Name	of Person		ne 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)
Regis Divisi	LING ADDRESS: tration Section ion of Corporations Box 6327	STREET/COUR Registration Section Division of Corpo Clifton Building	on

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AutoBizBrokers of Florida, LLC

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

03/15/2017 The Articles of Organization for this Limited Liability Company were filed on _ L17000059385 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 _ City

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

Title	<u>Name</u>	Address	Type of Action
MGR	Jude Creamer	333 2ND AVE, Suite 2000 MIAMI, FL 33131	_ ■ Add
		 	B Add
			□ Remove
	0		Change
MGR Scott Krause	Scott Krause	333 2ND AVE, Suite 2000 MIAMI, FL 33131	Add
		;-	
			☐ Change
			Remove
			Change
			Remove
			Change
			☐ Add
			□ Remove
		 	☐ Change
			☐ Add
			□ Велюче
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing:
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated February 18, 2019.
Signature of a member or authorized representative of a member
Scott KRAU SE Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00