Florida Departments of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

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Account Number : 120080000067 : (845)425-0077 Phone

: (845)818-3588 Fax Number

**Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please 🔅

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UA AEUIAM	TOMOTIVE, SEC	
(Name of the Limited Liability Con (A Florida Limit	namy as it now movemen on our recond Limbility Company)	da)
The Articles of Organization for this Limited Liability Comparing Horida document number L17900062378	uny were filed on March 17, 2017	and assigned
Tiblida Boctanom manion	***	
This amendment is submitted to amend the following:	·	
A. If amending name, enter the new name of the limited li	iability company here:	
HOLTZ AUTOMOTIVE, LLC		
The new mome must be distinguishable and contain the words "Limited Li	iability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		- <u> </u>
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
The second of th		
Enter new mailing address, if applicable:		
(Mulling address MAY BE A POST OFFICE BOX)		-0 = 1
	· // 4 () -	
		<u>~</u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address?	l office uddress on our recor here: Li	ds, enter the name of the new
	Ž.	
Name of New Registered Agent:	···	
ss b to the day.		
New Registered Office Address:	Enter Florida streat addi	att.
	. 1	Florida
	Ciry	Zip Cods

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, Stenature of New Registered Agent

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or removed If amendin	g Authorized Person(s) authorized from our records:	i to munige, enter the tit name, and add	ress of each person being add
MGR≔ N AMBR≔ A	Annager Authorized Member		
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			Jose Baral	20110					