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TALLAHASSEE, FLORIDA

COVER LETTER

Registration Section

TO:

Division of Corporations		ı	
SÙBJECT:	 T & F 	CLASSIC CARS LLC	
	Name d	Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this m	atter to the following:	
	Matus Navrat		
	N&O SERVICES, LL	Name of Person	
	228 Park Ave S #8639	Firm/Company	
		Address	
	New York, NY 10003	1502 City/State and Zip Code	
	info@navratlaw.com E-mail addre	ss: (to be used for future annual report notif	ication)
For further information of	oncerning this matter, plea	se call:	·
Matus Navrat		212 203-8240 at ()	
Name e	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

T& F CLASSIC CARS 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 on03/20/2017	and assigned
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	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	题 4 1
(Principal office address MUST BE A STREET ADDRESS)	SE SE
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, entregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	8: 53
;———————, Florida	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 provisions of all statutes relative to the proper and complete performance of my duties, and I accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. (being filed to merely reflect a change in the registered office address, I hereby confirm that the company has been notified in writing of this change.	m familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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
MGR	FILIP KRAL	3011W 99th St., PALOS HILL	45/160465 = Add
			Remove
			☐ Change
			Add
			🗖 Remove
		1	□ Change
			D Add
			□ Remove
			□ Change
			Add
			Remove
			Change
			
			Remove
			Change
			□ Add
			□ Remove
		ı	☐ Change

D. If amending any other information, enter	r change(s) here: (Attach additional sheets, if necessary.)
	
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F. Effective data if other than the data of F.	
(If an effective date is listed, the date must be specific at	ng: (optional) nd cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
document's effective date on the Department of	meet the applicable Statutory Illing requirements, this date will not be listed as the
If the record specifies a delayed effective (b) The 90th day after the record is filed	date, but not an effective time, at 12:01 a.m. on the earlier of:
Dutad August 31	
Dated	
Signature of a	member or authorized representative of a member
	ANTON DZURILLA
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00