L17000079301

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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COVER LETTER

Div	ision of Cor	porations					
SURIFCT:		TAMAUTOS SALES & SERVICE LLC.					
SOBJECT.	Name of Limited Liability Company						
The enclosed	l Articles of .	Amendment and fec(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		JESUS A CAMAUTA					
			Name of Person				
		CAMAUTOS SALES & S	ERVICE LLC.				
			Firm/Company				
		722 HAVEN PLACE					
		* ************************************	Address				
		TARPON SPRINGS, FL.	34689				
			City/State and Zip Code				
		JCAMAUTA@YAHOO.CO					
		E-mail address: (to be used for future annual report notif	ication)			
For further is	nformation c	oncerning this matter, please co	all:				
JESUS CAN	IAUTA		727 777-3996				
	Name o	l Person	at () Area Code Daytime	Telephone Number			
Enclosed is a	ı check for th	ne following amount:					
□ \$25.00 F	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:

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2017 JUL 14 PH 2: 37
FALLAHASSFE, FLORIDA

CAMAUTOS SALES & SERVICE 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 Florida document number L17000079301		and assigned
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	mited liability company he	<u>re</u> :
The new name must be distinguishable and contain the words "L	.imited Liability Company," the d	rsignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8801 66TH STR	EET NORTH #E-2
	DRESS) PINELLAS PAR	RK. FL 33782
Enter new mailing address, if applicable:	8801 66TH STR	EET NORTH #E-2
	PINELLAS PAI	PK FL 33782
B. If amending the registered agent and/or re	gistered office address on	
B. If amending the registered agent and/or re	gistered office address on	
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac Name of New Registered Agent:	gistered office address on	our records, enter the name of the ne
If amending the registered agent and/or registered agent and/or registered agent and/or the new registered office address. Name of New Registered Agent: New Registered Office Address: 8801 66	gistered office address on ddress here:	our records, enter the name of the ne
B. If amending the registered agent and/or regregistered agent and/or the new registered office act and agent: New Registered Office Address:	gistered office address on ddress here: OF 66TH STREET NORTH #E- Enter Flor PELLAS PARK	our records, enter the name of the ne
Name of New Registered Agent: New Registered Office Address: PIN	gistered office address on ddress here: 11 66TH STREET NORTH #E- Enter Flor PELLAS PARK	our records, enter the name of the ne
B. If amending the registered agent and/or regregistered agent and/or the new registered office act and agent: New Registered Office Address:	gistered office address on ddress here: 11 66TH STREET NORTH #E- Enter Flor PELLAS PARK	our records, enter the name of the ne

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	NELVERK E SALAS-BARBOZA	3700 FAR VIEW CIR ±1714, WIN	Add
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			Change
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ocument's effectiv	e date on the Dep	artment of S	tate's records	-				
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JESUS A	\ CAMAUTA	\ '		1				

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Filing Fee: \$25.00