

L17000127954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

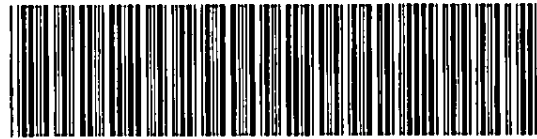
(Business Entity Name)

(Document Number)

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Shelton, J. Paul
TALLAHASSEE, FL 32304

OCT 08 2018
T SCHROEDER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AAA CAR RENTAL SERVICES 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:

LUCIEN GUERRIER LAMARRE

Name of Person

AAA CAR RENTAL SERVICES LLC

Firm/Company

4701 SW 45 ST BLDG 8 BAY 26

Address

DAVIE FL 33314

City/State and Zip Code

AAACARDEALERLLC@GMAIL.COM

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

For further information concerning this matter, please call:

LUCIEN GUERRIER LAMARRE 786 376-7787
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

AAA CAR RENTAL SERVICES

(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 09/24/2018 and assigned
Florida document number L17000127954.

This amendment is submitted to amend the following:

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

AAA CAR SERVICES LLC

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)

4701 SW 45TH STREET BLD 8 BAY 26
DAVIE, FL 33314

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1154 NW 100 AVE
PEMBROKE PINES, FL 33024

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:

LUCIEN GUERRIER LAMARRE

New Registered Office Address:

1154 NW 100 AVE

Enter Florida street address

PEMBROKE PINES

Florida

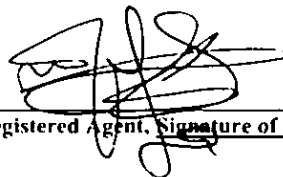
33024

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>
PRES	LUCIEN GUERRIER LAMARRE	1154 NW 100 AVE PEMBROKE PINES, FL 33024	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SHERIFF'S OFFICE

18 OCT - 1 AM 7:36
BOSTON
FALL RIVER, MASSACHUSETTS

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18 OCT -1 AM 7:36
U.S. DISTRICT COURT
NORTH DAKOTA

E. Effective date, if other than the date of filing: _____ (optional)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 09/24/2018

LGL.

Signature of a member or authorized representative of a member

LUCIEN GUERRIER LAMARRE

Typed or printed name of signee