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S. WARREN SEP 2 5 2017

COVER LETTER

TO: Registration Sec Division of Corp			
SURJECT:	Davey's Automotiv	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Wayne	Davey 3r Name of Person	
	Daviy's	Automotive LLC Firm/Company	
	540 N. State	Road 434, Suit	<u>c 68</u>
	Altamonte Spr	rings / Florida 32' Cidy/State and Zip Code	714
	Davius Autom Ednail address: (t	otive LLC@ amail, con	ation)
For further information co	oncerning this matter, please ca	11):	
Wayne Day Name of	Person	at (<u>347</u>) <u>751 31</u> Area Code Daytime 7	elephone Number
Enclosed is a check for th	e 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)

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

Dayen's Automoti	ve LLC				
(Name of the Limited	Liability Commany Florida Limited Lin	as it now appears ability Company)	on our records.		
The Articles of Organization for this Limited Lial	bility Company w	vere filed on 8	110/17	and assi	gned
Florida document numberL1700017105			1 1		
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liabili	ity company her	e:		
	re (no	change)			
The new name must be distinguishable and contain the wor	ds "Limited Liabilit	y Company," the des	ignation "LLC" or the a	abbreviation "L.L	.C."
Enter new principal offices address, if applical	ble:	<u></u>	change		
(Principal office address MUST BE A STREET	ADDRESS)				
					
·				1286	;;
Enter new mailing address, if applicable:		<u></u>	change	}	ा जिक्का १
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>			 	
					<u></u>
B. If amending the registered agent and/or	r registered offi	ce address on a	nur records entai	S the Stome of	f the new
registered agent and/or the new registered offi		ce addites on	our records, <u>enter</u>	RIDA	<u>Luie new</u>
Name of New Registered Agent:	Wayne ?	David gi	<u> </u>		
New Registered Office Address:	540 N		a street address	, Suite	<u>68</u>
	Altamonte	Springs	, Florida _	32714	
		Cilly J		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 = Man AMBR = Auti	ager horized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Wayne Davey Ir	540 N. State Road 434, Suite Altomonte Springs, FL 32714	<mark>68</mark> □ Add
		Altamonte Springs, FL 32714	Remove
			D Change
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. II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessal	ry.)
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(If an ef Note:	ive date, if other than the date of filing: B 10 2017 (optional fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this date ent's effective date on the Department of State's records.	g.) Pursuant to 605.0207 (3)(
the re) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. 90th day after the record is filed.	on the earlier of:
Dated	September 20th, 2017	
	Days, Javay A	Zin.
	Signature of a member or authorized representative of a member	EC:
	Wayne Daving Jr Typed or printed name of signee	FILI EP 22 ETARY MASSE
	Page 3 of 3	PH 1:1 OF STATE, FLOR
	Filing Fee: \$25.00	DA 6