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· COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: COUSEWAY M	otors lic
	of Limited Liability Company
The enclosed Articles of Amendment and fee(s)	ire submitted for filing.
Please return all correspondence concerning this	matter to the following:
San	vel T. Romero
	Name of Person
Couse	bay Motors UC
	Firm Company
5324	Jauseway blud
-	Address
tampo	, FWeida 33619
,	City/State and Zip Code
Carsens	In the be used for future annual report notification)
For further information concerning this matter, p	ënse call:
Maria Rodríguez	11(813) 2086906
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S25.00 Filing Fee	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, tills Certified Copy Certificate of Status & tadditional copy is enclosed) Certified Copy tadditional 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

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Zip Code

(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 OBOD and assigned Florida document number 1700 180403.

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 "Limite	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	SS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BON)	
90	
B. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records, <u>enter the name of the ne</u> ss here:
	
Name of New Registered Agent:	
Simple diameters	
New Registered Office Address:	Enter Florida street address
	Classida.

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.

City

H Changing Registered Agent, Signature of New Registered Agent

AMBR = Au	inager ithorized Member	
<u>'itle</u>	<u>Name</u>	Address Type of Action
MBR	Robertol Marti	1020 Beacan Ave Tampa, FL 33603 MANN
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		22 Change Change FLORE STEEL FLORE STAND
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Effective date, if other than the flan effective date is listed, the date mu	ist be specific and ca	nnot be prior to date	of filing or more than	(optional) 90 days after filmg.) Pursuant to 605,0207 (3)(
Note: If the date inserted in this bedocument's effective date on the I	lock does not med Department ig f Stat	rt the applicable st le's records,	atutory filing requir	ements, this date	will not be listed as the
ne record specifies a delaye	d effective dat	e, but not an i	effective time, a	t 12:01 a.m.	on the earlier of:
The 90th day after the red	ord is filed.				
Dated NOVEMBER 1	a	F10C			
Dated 1000 Million Pr	<u> </u>	6/10			
1		THEREW.		_/	
	Signature dita men	nter or authorized r	epresentative of a men	nber	·
	Sam	vel t.	Rome	RO.	
<u></u>		ped or printed name			
		Page 3 of	3		
		Filing Fee: \$3	25.00		