Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180003677463)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : DEALER CONSULTING SERVICES, INC.

Account Number : 120010000121 Phone

: (305)758-9001

Fax Number

: (888)501-2390

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AUTO TRADE AND LEASING LLC

Certificate of Status	0
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Estimated Charge	\$25.00

EXAMINER

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Corporate Filing Menu

Help

To: '8508176390@rcfax.com' Fax: (859) 817-6389

Page: 3 of 6

12/31/2018 12:14 PM

COVER LETTER

((H180003077463))

TO: Registration So Division of Cor		
SUBJECT: AUTO TR	ADE AND LEASING ELC	
	Name of Limited Liability Company	
The enclosed Articles of	Amendment and fcc(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	NASTASSJA TULIN	
	Name of Person	
	DEALER CONSULTING SERVICES	
	Firm/Company	
	7537 NW 7TH AVE	
	Address	
	MIAMI, FL 33150	
	City/State and Zip Code	
	CORPORATIONS@DCSMIAMI.COM	
	E-mail address: (to be used for future annual report notification)	
For further information e	oncerning this matter, please call:	
NASTASSIA TULIN	305 758-9001	
Name of Person Area Code Daytime Telephone Number		
	2019	
Enclosed is a check for th	ne following amount:	Ę
■ \$25.00 Filing Fee	Certificate of Status Certificate of Status Contified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

From: Sandra Porcz

FRX: 18085012390

company has been notified in writing of this change.

To: '8500170390@rcfnx.com' Fax: (850) 817-8380

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Page: 4 of 6 12/31/2018 12:18 PM H180030774631)

	Linbility Company as it now appears on our records.) Florida Limited Liability Company)	
he Articles of Organization for this Limited Liabi	ility Company were filed on 11/14/2017	and assigned
lorida document numberL17000234850	······································	
his amendment is submitted to amend the following	ing:	
. If amending name, enter the new name of th	e limited liability company here:	
te new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable	e:	
rincipal office address MUST BE A STREET A	IDDRESS)	<u> </u>
		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO.	<u> </u>	
If amending the registered agent and/or	registered office address on our records, enter	r the name of the
If amending the registered agent and/or gistered agent and/or the new registered office	registered office address on our records, enter	r the name of the
eisteren agent anwor ine new registeren office	registered office address on our records, enter address here:	r the name of the
If amending the registered agent and/or gistered agent and/or the new registered office Name of New Registered Agent:	registered office address on our records, enter address here:	r the name of the
eisteren agent anwor ine new registeren office	registered office address on our records, enter address here:	the name of the
Name of New Registered Agent:	registered office address on our records, enter address here: Enter Florida since: address	2(19 JAN
Name of New Registered Agent:	Enter Florida street uddress	2(19 J.
Name of New Registered Agent:	Enter Florida street address City	2(19 JAN -

If Changing Registered Agent, Signature of New Registered Agent

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

rom:	Sandra	PAIDS

To: '8506176180@rcfax,com' FRX: (859) 617-6380

Page: 5 of 6

_____ Change

12/31/2018 12:16 PM

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: ((H19000367746 3))

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	ILYA ALEKSANDROVICH MELNIKOV	710 NE 141 STREET NORTH MIAMI, FL 33161	
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			■ Change
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Effective date, if other than the da (if an effective date is listed, the date must be	e specific and cannot be ori ne (to date of filing or more	then 90 days after filing	-) Diservant to	605 0207 (3)
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applica	ble statutory filing re	quirements, this date	will not be	listed as the
	TOTAL OF CALL A LOCKING.				
the record specifies a delayed e	ffective date, but not	. an effective time	e at12∘∩1 a.m.	on the an	rlior of
) The 90th day after the record	d is filed.		c, dt 12.0.t u.m.	On the sp	inter or.
Dated DECEMBER 27TH	2018				
Dated		 ·			
		16.			
		Mester	7		
	enguer of a member or author	Tized representative of a	member		

Page 3 of 3

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