## 117000264299

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## **COVER LETTER**

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SUBJECT:		AFFORDABLE AUTO	SALES OF SPRING HILL	LLC	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of Lim	nted Liability Company		
The enclosed	Articles of	Amendment and fee(s) are sub-	emitted for tiling.		
Please return	all correspo	ondence concerning this matter	to the following:		
			SAYED ZAYED		
			Name of Person		
		AFFORDABLE .	AUTO SALES OF SPRING	G HILL LLC	
		<del></del>	Firm/Company		
	3478 COMMERCIAL WAY				
			Address		
	SPRING HILL, FL 34606				
			City/State and Zip Code		
		E-mail address: (	to be used for future annual report not	afication)	
For further int	formation c	oncerning this matter, please ca	all:		
	SAYED	ZAYED	at ( <u>813</u> ) 750-6869	9	
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a	check for t	ne following amount:			
■ \$25,00 Fit	ling 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)	
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assec, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co	on grations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## AFFORDABLE AUTO SALES OF SPRING HILL 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 Comp		and maintail
Florida document number <u>L17000264299</u>	rany were filed on 12/20/2017	and assigned
Florida document number		
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 "Limited 8	fliability Company," the designation "LEC" or th	ie abbreviation "L.L.C."
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET ADDRES.	<u>S)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere	d office address on our records, ent	ter the name of the na
registered agent and/or the new registered office address	here:	
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Florida	_ 5A F
	Cuy	Zip Code
New Registered Agent's Signature, if changing Registered Ag		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	elete performance of my duties, and I a as provided for in Chapter 605, F.S. (	m familiar with and Or, if this document is
lf.	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>	Address	Type of Action
AMBR	SAYED ZAYED	4821 PLANTATION DR TAMPA, FL 33615	
			<b>■</b> Remove
			□ Change
			Add
			☐ Remove
			☐ Change
	·		Add
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	57 -
Iffective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9  Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time, at The 90th day after the record is filed.	t 12:01 a.m. on the earlier $\epsilon$
Sayed Zayed  Sayed Zayed	
Signature of a member or authorized representative of a mem	nber

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Filing Fee: \$25.00