L180000004085

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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09/17/24--01080--018 **80.00



COVER LETTER

TO: Registration : Division of C				
	NDUSTRIES LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	of Amendment and fec(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
•	GARY J CABRERA			
Name of Person				
	MERX INDUSTRIES LL	C		2024 SEP 17 1 SECRETARY
		Firm/Company		質問
	1907 E Fletcher Ave			题目
		Address		
	Tampa, FL 33612			99 99 18 1931 18
		City/State and Zip Code		
	Merxautosales@gmail.com	to be used for future annual report noti	tientien)	
For further information	concerning this matter, please c	·		
GARY J CABRERA		813 2038669		
Name of Person		at () Area Code Daytim	e Telephone Number	 -
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Addr Registration Division of P.O. Box 61 Tallahassee	r Section Corporations 327	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Tallahassee e Street, Suite 8	10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MERX INDUSTRIES LLC		
(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records la Limited Liability Company)	··)
The Articles of Organization for this Limited Liability (Florida document number 1.18000004085	Company were filed on 01/04/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
MERX AUTOSALES LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		921, SE SECRE
<u>Principal office address MUST BE A STREET ADD</u>	RESS)	<u> </u>
		- 52
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		; [7] co
naming address man man to the tree to the		, , , _
3. If amending the registered agent and/or registere gent and/or the new registered office address here:	ed office address on our records, <u>enter (</u>	the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flo	
	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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change SERLAdd
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			□Add
			□Remove
			□Add
			□Remove
			□Change
			\ \ \ _ _ _ \Add
			Remove
			Cl. Change

Typed or printed name of signee