L18000004710

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COVER LETTER

Division of Cor	porations			
SUBJECT:	AVANCE MOTO	R Group ENTE	RPRISES LLC	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	DiANKO	Gil.		
		Name of Person		
	ADVANCE M	OTOR CROUP EN	TERPRISES LLC.	C PRISEP 27 PRINT
	9695 NW	79 AUE BAY #	= 34-35	- = £
	HIA GAN	GALDERS FL	330/6 8	1
	Advance m. E-mail address: (1	City/State and Zip Code 4 + Or Group 7804 (D) to be used for future annual report north	grail com	T I
For further information c	oncerning this matter, please co	oll:	- 150 	
DIANKO	Σ, ι	at (<u>786)</u> 4/6 - 0	2643	
Name o	f Person	Area Code Daytime	: Telephone Number	
Enclosed is a check for the	ne following amount:		; '	,
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

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

(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	ENTERPRISES LLC ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed o	n <u>01 - 05 - 2018</u> and assigned
Florida document number <u>L1800000 4710</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comparation of the limited liability comparation of the new name must be distinguishable and contain the words Limited Liability Company.	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SEP 27 D
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	s on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	r Florida street address
r.me	•
City	Florida

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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