

L18000020355

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(City/State/Zip/Phone #)

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FILED
2018 MAY -4 A 11:51
TOLSON COUNTY, MISSISSIPPI

D. SCOTT

MAY 10 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Auto Sales International LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yovanka Castellanos

Name of Person

YCCTAX LLC

Firm/Company

11251 NW 20th St Suite 110

Address

Miami FL 33172

City/State and Zip Code

yovanka@ycctax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yovanka Castellanos

305 456-7239
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AUTO SALES INTERNATIONAL 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 Company were filed on January 23, 2018 and assigned
Florida document number L18000020355.

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 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 ADDRESS)

9551 NW 79th Ave

Suite 1

Miami Lakes FL 33016

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9551 NW 79th Ave

Suite 1

Miami Lakes FL 33016

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	Jose Angel Lagardera	6701 NW 7th St	<input type="checkbox"/> Add
		Suite 190	<input type="checkbox"/> Remove
		Miami, FL 33126	<input checked="" type="checkbox"/> Change
VP, S	Andres Alejandro Hernandez Hernandez	4508 SW 160th Ave	<input type="checkbox"/> Add
		Unit 711	<input type="checkbox"/> Remove
		Miramar, FL 33027	<input checked="" type="checkbox"/> Change
MGR	Angel Diogenes Lagardera Contreras	4712 NW 114th Ave	<input type="checkbox"/> Add
		Unit 201	<input type="checkbox"/> Remove
		Miami, FL 33178	<input checked="" type="checkbox"/> Change
D	Alvaro Martinez Lara	10805 NW 89th Ter	<input type="checkbox"/> Add
		Build 4 Apt 109	<input checked="" type="checkbox"/> Remove
		Doral, FL 33178	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

EIN- 82-4150513

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated April 26

Signature of a member or authorized representative of a member

Typed or printed name of signee