118000020599

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.Incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops mstops@incserv.com

850.656.7953

REQUEST DATE 8/27/2019

PRIORITY Routine

OUR REF # (Order ID#) 766210

ORDER ENTITY

COLLIER CAR CLUBS FL I LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

COLLIER CAR CLUBS FLILLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

Email address for annual report reminders: rsilverman@ghplaw.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

2019 EUG 27 AH 10: 13

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Collier Car Clubs FL 1 LLC		
(Name of the Limit	ted Liability Company as it now: (A Florida Limited Liability Com	appears on our records.) pany)	25
The Articles of Organization for this Limited L. Florida document number <u>L18000020599</u>	iability Company were filed (on January 24, 2018	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liability compa	any here:	
	Collier Car Clubs LLC		
The new name must be distinguishable and contain the v	vords "Limited Liability Company,	," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	eable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		. 2
-			•
			
Enter new medica address if annicables			· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:			THE PARTY NAMED IN COLUMN
(Mailing address MAY BE A POST OFFICE BOX)			75+ C.)
			
B. If amending the registered agent and registered agent and/or the new registered o		ess on our records, <u>ente</u>	r the name of the no
registered agent and/or the new registered o	mice address nere.		
Name of New Registered Agent:	Incorporating Services, Ltd	l	, manuar de la companya de la compan
New Registered Office Address:	1540 Glenway Drive		
registered Office Hadiogs	En	ter Florida street address	
	Tallahassee	, Florida _	32301
	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.

hanging Registered Agen. 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
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			□ Remove
			Add
			Remove
			Change
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ote: If the	te, if other than the date late is listed, the date must be s date inserted in this block officetive date on the Depart	loes not meet the applic	cable statutory filing	re than 90 days after fi	ling.) Pursuant to 605.0
	specifies a delayed eff day after the record		ot an effective ti	me, at 12:01 a.	ກ. on the earlieເ
ated	August 27	. 2019	·		
		- Andrews			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00