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## COVER LETTER

Division of Cor			
	LC		
SOBJECT.	Name of Lim	ited Liability Company	
	Alejandro Quintero		
		Name of Person	
	Intomoto		
	-	Firm/Company	
	14 NE 1st Ave 10th Floor		
Intomoto LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Lease return all correspondence concerning this matter to the following:  Alejandro Quintero  Name of Person  Intomoto  Firm/Company  14 NE 1st Ave 10th Floor  Address  Miami, FL 33132  City/State and Zip Code info@intomoto.com  E-mail address: (to be used for future annual report notification)  or further information concerning this matter, please call: Alejandro Quintero  1 954  Name of Person  Area Code  Daytime Telephone Number  The S25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy) is enclosed)  Certificate of Status  Certified Copy (additional copy) is enclosed)			
	Miami, FL 33132		
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:  Alejandro Quintero  Name of Person  Intomoto  Firm/Company  14 NE 1st Ave 10th Floor  Address  Miami, FL 33132  City/State and Zip Code info@intomoto.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Alejandro Quintero  Alejandro Quintero  Person  Area Code  Daytime Telephon  Enclosed is a check for the following amount:  Selection of Status  Certified Copy (additional copy is enclosed)			
For further information of			ication)
Alejandro Quintero			
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee		Certified Copy	☐ \$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

Intomoto LLC			
( <u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears of ed Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Compa	nny were filed on	02/06/2018	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	iability company here	<b>2</b> :	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the desi	ignation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	14 NE 1st Ave		<b>7</b> A.S.
(Principal office address MUST BE A STREET ADDRESS)	10th Floor		L AF
	Miami, FL 33132		-S
Enter new mailing address, if applicable:	14 NE 1st Ave		Y OF S
(Mailing address MAY BE A POST OFFICE BOX)	10th Floor		PATE ORIGINAL SERVICE
	Miami, FL 33132		O
B. If amending the registered agent and/or registered registered agent and/or the new registered office address have a Name of New Registered Agent:		our records, <u>enter</u>	the name of the ne
14 NE let A	ve 10th Floor		
New Registered Office Address:		a street address	
Miami		. Florida <sup>33</sup>	132
	City	, 1 101 144	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>	Type of Action
MGR	KEYTOSS LLC	1454 W Willow St	Add
		Chicago, IL 60642	■ Remove
			Change
MGR	Alejandro Quintero	14 NE 1st Ave	
		☐ Add  10th Floor ☐ Remove  Miami, FL 33132 ☐ Change ☐ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change	
		Miami, FL 33132	☐ Change
			Add
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Effec	tive date, if other than the date of filing:(optional)		
Note:	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs If the date inserted in this block does not meet the applicable statutory filing requirements, this date will repert seffective date on the Department of State's records.		
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	ne earlier	· of
Dated	february 26th, 2016		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00