118000039137

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CABLL AND/OR VIDEO FRANCHISING DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

COVER LETTER

	istration Sec ision of Corp			
SUBJECT:	Mr Car Gro	up LLC		
NODJECT.		Name of Lim	ited Liability Company	
The enclosed	l Articles of z	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Karen Mira		
			Name of Person	
		Mr Car Group LLC		
			Firm/Company	
		1161 Nw 36 St		
			Address	· · ·
		Miami Fl 33127		
		mrcargrouplle@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti	ification)
For further in	iformation co	oncerning this matter, please co	all:	
Karen Mira 305 7978537 at ()				
	Name of	Person	Area Code Daytim	ne Telephone Number
Enclosed is a	check for th	e following amount:		
≌ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 81
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mr Car Group LLC	
(Name of the Limited Lia (A Flo	ibility Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit Florida document number L18000039137	y Company were filed on 12/13/2024 and assigned
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 AL	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our records, <u>enter the name of the new registere</u> :
Name of New Registered Agent:	
New Registered Office Address:	
•	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Regist	ered Agent:
provisions of all statutes relative to the proper an accept the obligations of my position as registered	ent and agree to act in this capacity. I further agree to comply with the d complete performance of my duties, and I am familiar will and d agent us provided for in Chapter 605, F.S. Or Affixedocument is tered office address. I hereby confirm that the limited fiability ge.
	FOX T

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

Title	<u>Name</u>	Address	Type of Action
AMBR	IVAN HERNANDEZ ALONSO		□Add
		20731 SW 122 CT MIAMI FL 33177	≣Remove
			□Change
			□ Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□ Add
			Remove
		<u>-</u>	□Change
			□Add
			Remove
			MANUFICE 30 PM 2: 24 PM PRANCHISING PORPIONS TAULAHAS SEE, FLORIDA
			FLOWER DEPORT

					· <u> </u>		
		-					
							
							
Effective date, if other than the fan effective date is listed, the date many many many many many many many many	nust be specific and car block does not mee Department of State	nnot be prior to date t the applicable s e's records.	of filing or more the tatutory filing req	uirements, this d	ing.) Pursuant ate will not b	e listed	l as
rd is filed.							
DECEMBER 13		2924					
		round (T DIV	282	
	Signature of Angel	ther or authorized	representative of a	member	ALC:	1024 DEC 30	-
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10	an Hei	nandez	Alons-0		SEE CH	_	; -
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Filing Fee: \$25.00