

L18000040811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

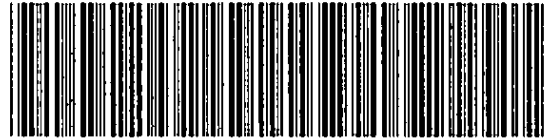
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600311044786

04/03/18--01002--013 **30.00

18 APR -B AM 9:49
11:21:11

Y SULKER

APR 09 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Legacy Dealer Solutions, 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:

Dave Marrero

Name of Person

Legacy Dealer Solution, LLC

Firm/Company

2401 W Bay Drive #321

Address

Largo, FL 33770

City/State and Zip Code

Alberto@domlaw.com

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

For further information concerning this matter, please call:

Dave Marrero

813
at ()

422-0404

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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
(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**

Legacy Dealer Solutions, 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 02/14/2018 and assigned
Florida document number 118000040811.

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:

2401 W Bay Drive #321

(Principal office address MUST BE A STREET ADDRESS)

Largo, FL 33770

Enter new mailing address, if applicable:

2401 W. Bay Drive #321

(Mailing address MAY BE A POST OFFICE BOX)

Largo, FL 33770

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

City, Florida 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>
AMBR	Ian Gamberg	2401 W Bay Drive #321	<input type="checkbox"/> Add
		Largo, FL 33770	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Delaney Valdes	2401 W Bay Drive #321	<input type="checkbox"/> Add
		Largo, FL 33770	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Andrew Arena	2401 W Bay Drive #321	<input type="checkbox"/> Add
		Largo, FL 33770	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Anthony Maniscalco	2401 W Bay Drive #321	<input type="checkbox"/> Add
		Largo, FL 33770	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Dave Marrero	2401 W Bay Drive #321	<input type="checkbox"/> Add
		Largo, FL 33770	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Dave Marrero		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

18 APR - 5 AM 2014

18 APR - 8 AM '92

10 APR -B AM 5:49

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 03/28/2018

D. M. Worrell

David Marrero

Page 3 of 3

Filing Fee: \$25.00