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COVER LETTER

TO: Registration Section of Corp			
SUBJECT: TU	RN Key Mot Name of Limi	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	John Ha	Name of Person	
	Turn	Ley Motoes, LU	<u>د</u>
	140 NE	Cider Terrace Address	<u></u>
	<u>lake Ci</u>	ty FL 32055 City/State and Zip Code	5
	tuvkeymot E-mail alldress: (t	to 25 1/c@ ghail. Co	cation)
For further information co	ncerning this matter, please ca	dl:	
John Harr Name of	ington Person	at (<u>386</u>) <u>319-</u> Area Code Daytime	Caracter Sumber
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

Turn Key Motor	ty Company as it now appears on our re	agards)
(A Florida	Limited Liability Company)	ecorus.)
The Articles of Organization for this Limited Liability C	ompany were tiled on <u>Feb</u> 3	12, 2018 and assigned
Florida document number <u>L180000 483 04</u>	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	6 A TA
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation	"LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:		20
(Principal office address MUST BE A STREET ADDR	RESS)	
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street c	ultruss
	izmer i taritat street t	nui ess
	City	_, Florida Zip Code
	City .	in cone

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_	Frank Capallia	1125W Capellia Glo	
		11250 Capellia Glo Lake City, Fl 32024	Remove
			Change
MGR	John D. Harrington		
		<u> </u>	□ Remove
			Change P 2 Add
			© Femove 5
			· □ Change
			Remove
			Change
			☐ Remove
			☐ Change
			🖸 Add
			Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
We just need Frank Capallia removed
from Turn Key Motores, U.C.
He will no longer be a manager in
the organization.
We elect this change starting effective
4/19/18@ 12:43 P.M.
Withesses to this management decision arei
John Harrington
Frank Capallia
Kyra Hurley
<u> </u>
This decision was based on a business
management level.
5 5
E. Effective date, if other than the date of filing: 19.18.19.43P. (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) 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.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated 19 APRIL . 2618 . Signature of a member or authorized representative of a member
John Ditarring ton Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00