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SECRETARY OF STATE DIVISION OF CORPORATION

N COOPER MAY 17 2018

COVER LETTER

TO:	Registration Se Division of Cor				
CHIDIE		ar Sales LLC			
SUBJE	CI:	Name of Lim	ited Liability Company		
The enc	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ndence concerning this matter	to the following:		
		Alexander Deiters			
			Name of Person		
		Phoenix Car Sales LLC			
	Firm/Company				
	15420 SW 136th ST unit 40				
			Address		
		Miami FL 33196			
			City/State and Zip Code		
		phoenixcarsales01@gma			
			to be used for future annual report no	tification)	
For furt	her information c	oncerning this matter, please ca	all:		
Alexander Deiters		786 266-1815			
	Name o	f Person		me Telephone Number	
Enclose	ed is a check for the	ne 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)	
	Registr Divisio P.O. Be	ation Section on of Corporations ox 6327 issee, FL 32314	STREET/COUP Registration Sect Division of Corp Clifton Building 2661 Executive C	orations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Phoenix Car Sales LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number L18000060131	ompany were filed on 03/07/2018	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ited Liability Company," the designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	SEGRET DIVISION (18 MAY
Enter new mailing address, if applicable:		6 OF CO.
(Mailing address MAY BE A POST OFFICE BOX)		AMII: 2:
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		ເພ ັ ≋ ne name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered	l 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>	Name	Address	Type of Action
			☐ Remove
		-	
		 	
			□ Remove
			_ ☐ Change
			□ Add
			Remove
			☐ Change
			Add
			☐ Remove
			□ Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change

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ective date, if other than the effective date is listed, the date must ex. If the date inserted in this blument's effective date on the De	he specific and cannot be pack does not meet the app	olicable statu	filing or more than 90 tory filing requiren	(optional) days after filing.) Purnents, this date will	suant to 605, not be liste
record specifies a delayed he 90th day after the reco		not an eff	ective time, at	12:01 a.m. on t	he earlie
ed	2018		M		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00