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## **COVER LETTER**

	Registration Se Division of Cor			·
end icz		utomotive FD CW, LLC		
SUBJEC	JI:	Name of Limi	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Logan Parker		
			Name of Person	
		Bass Sox Mercer		
			Firm/Company	
		2822 Remington Green Cir	rele	
		-	Address	<del></del>
		Tallahassee, Florida 32308		
			City/State and Zip Code	
		lparker@dealerlawyer.ccom		<u> </u>
		E-mail address: (t	o be used for future annual report noti	fication)
For furth	er information o	oncerning this matter, please ca	ult:	
Logan P	arker		850 878-6404 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ne following amount:		
□ <b>\$</b> 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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Manney, Carrott, Code, 910

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.)		
(A Florida Limited	Liability Company)		
he Articles of Organization for this Limited Liability Company	were filed on March 23, 2018	an	d assigned
orida document number			
nis amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liah	oility company here:		
e new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designation "LLC" or	he abbreviati	on "L.L.C."
		( <b>P</b> )	20
nter new principal offices address, if applicable:		<u> </u>	2022
rincipal office address MUST BE A STREET ADDRESS)		t► ; ™	_ <del></del>
	<u></u>	<b>&gt;</b>	<
		70.75 70.75	ယါ
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iter new mailing address, if applicable:		<del></del>	<del>- 2</del> - C
failing address MAY BE A POST OFFICE BOX)		(E. K.)	
			-01
If amending the registered agent and/or registered office:	address on our records enter the	name of th	e new regi
ent and/or the new registered office address here:	address on our records, enter the	name or en	e new regi
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida street address		-
	Florid		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 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>	Address	Type of Action
MGR	Fernando Arellano Geddes	696 Beal Parkway Northwest	🗀 Add
		Fort Walton Beach, Florida 32547	Remove
MGR	Juan Carlos Correa Ballesteros	696 Beal Parkway Northwest	<b>=</b> Add
		Fort Walton Beach, Florida 32547	□Remove
			□Remove
			□ Change
			🗆 Add
			Remove
			□Remove
			□ Change
			□Add

\_\_\_\_\_ □Remove

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D. Dec	in the State at the the State of Files.
(If an ef <u>Note:</u>	ive date, if other than the date of filing:
If the recor	rd 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 led.
Dated	May 13 . 2022
	N/X:
	Signature of a member or authorized representative of a member
	Logan Parker

Typed or printed name of signee