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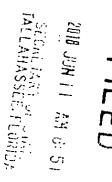
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## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 3 Gays Tives 11C  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:
Omar Lopez-Vidal Name of Person
3 Gays Tires Firm Company
2843 Beaver Dr.
De Hora, FL 32725 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Omar Lopez-Vidal at (386) 315-7562  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee \& Certificate of Status \$\Bigcup \$55.00 Filing Fee \& Certificate of Status \& Certified Copy & Certificate of Status \& Certified Copy & 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

Name of the Limited Liability Compan (A Florida Limited Li	ny as it now appears on our records.)  Tability Company)
The Articles of Organization for this Limited Liability Company volument number <u>L18D00087192</u> .	were filed on $4/0/8$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ility company here:
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BON)	ASSECTIONED
<ol> <li>If amending the registered agent and/or registered off registered agent and/or the new registered office address here</li> </ol>	
Name of New Registered Agent: JPR	2 Accounting, LC
New Registered Office Address: 2751	Enterprise Rd, Ste 2098  Enter Morida street address
<u>Drange</u>	e City Florida 32763 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.

hanging 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 =	<b>Authorized Member</b>

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Omar Lopez-Vidal	2843 Beaver Dr.	<b>™</b> Add
		Deltona, 7L 32725	□ Remove
			□ Change
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Page 3 of 3

Filing Fee: \$25.00