

W18000117213

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

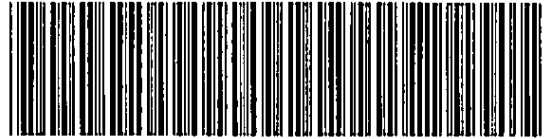
(Business Entity Name)

(Document Number)

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FALLAHASSEE, FLORIDA

2022 JUN 17 AM 11:21

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S. PRATHEI

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SUNCOAST AUTO DEALER 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:

JORGE CHAVEZ

\_\_\_\_\_  
Name of Person

SUNCOAST AUTO DEALER

\_\_\_\_\_  
Firm/Company

1310 SEEDS AVE. STE B

\_\_\_\_\_  
Address

SARASOTA, FL 34237

\_\_\_\_\_  
City/State and Zip Code

DCDEALER1310@GMAIL.COM

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

For further information concerning this matter, please call:

JORGE CHAVEZ OR EMILY NIEVES

941 954-6097  
at ( )

\_\_\_\_\_  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

SUNCOAST AUTO DEALER LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2022 JUN 17 AM 11:21  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/10/2018

Florida document number L18000117213

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:**

2221 17TH ST. SARASOTA, FL 34234

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

2221 17TH ST. SARASOTA, FL 34234

**(Mailing address MAY BE A POST OFFICE BOX)**

**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*

Florida

*City*

*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



**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (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

60-1-22

2022

Signature of a member or authorized representative of a member

JORGECHAVEZ

Typed or printed name of signee

FILED  
2022 JUN 17 AM 11:21  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

Florida

DRIVER LICENSE



CLASS E  
ID# C120-420-72-412-0



CHAVEZ  
JORGE  
18222 SYLVAN WOODS DR  
SARASOTA, FL 34233-2932

DOB 12/12/1972 SEX M SAFE DRIVER  
EXP 11/12/2026 HGT 5' 05"  
EYES NONE HAIR NONE

EXP 02/26/2018  
LIC 80782200001



Operation of a motor vehicle requires  
possession of a valid license and required by law