

L18000/19421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

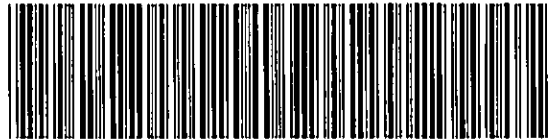
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O SIMMONS
JUL 20 2018

The UPS Store®



The UPS Store
38 S Blue Angel Pkwy
Pensacola, FL 32506
850.457.0848

Fax

To Octavio Simmons

Company _____

Fax number 850-245-6030

Date 7-16-18

Job number _____

From Omni Auto Broker LLC

Phone number 850-760-6265

Fax number 850-434-1200

Total Pages 4

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JUL 20 2018

The UPS Store®

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38 S Blue Angel Pkwy
Pensacola, FL 32506
850.457.0848

FaxTo Octavia

Company _____

Fax number 850-245-6030Date 7-16-18

Job number _____

From Omn: Auto Broker LLCPhone number 850-760-6265Fax number 850-434-1200Total Pages 4

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MAIL ROOM
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Omni Auto Brokers 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:

President, Julius Jones

Name of Person

Omni Auto Brokers LLC

Firm/Company

3930 Nth. W. St. Unit D

Address

Pensacola Florida 32505

City/State and Zip Code

omniautobrokers1@gmail.com

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

For further information concerning this matter, please call:

Julius Jones

850 760-6265

Name of Person

at ()

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Omni Auto Brokers LLC

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

The Articles of Organization for this Limited Liability Company were filed on 5/14/18 and assigned
Florida document number L8000119421.

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:

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

Enter new mailing address, if applicable:

(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:

President Julius Jones

New Registered Office Address:

3930 Nth. W. St Unit D

Enter Florida street address

Pensacola

, Florida 32505

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

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>	<u>Type of Action</u>
President	Julius E. Jones Sr.	3930 N.W. St Unit D	<input checked="" type="checkbox"/> Add
		Pensacola FL 32505	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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

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18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 1/11/18 (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

7/11/18

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Julius Jones
Typed or printed name of signee

Typed or printed name of signee