L18000130741

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(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

то:	Registration Se Division of Cor			
emon		al Motors Group LLC		
SUBJ	ECT:	Name of Lim	ited Liability Company	····
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		Milagros Ahmad		
			Name of Person	
		International Motors grou	up LLC	
			Firm/Company	
		1213 US HWY 27 Suite		
		 	Address	
		Clermont FL, 34714		
		ahmadmilagroz@gmail.co	City/State and Zip Code om	
		E-mail address: (to be used for future annual report notifi	eation)
For fu	irther information co	oncerning this matter, please ca	all:	
Steve	en Bozzuto		352 874-5654	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclo	sed is a check for th	ne following amount:		
■ \$3	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

International Motors Group LLC			
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	nany as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Compan	y were filed on May 20,2018	and assi	gned
Florida document number L18000130741			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the	he abbreviation "L.l	C."
Enter new principal offices address, if applicable:		-	
Principal office address MUST BE A STREET ADDRESS)			<u>D</u> Y≤
		AUG	<u> </u>
		6 2	- 2E. - 2E. - 2E
Enter new mailing address, if applicable:		<u></u>	글짜루
Mailing address MAY BE A POST OFFICE BOX)		2	-중유C
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		29	<u> </u>
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	-	ter the name o	of the n
Name of New Registered Agent:			
New Registered Office Address:	Poster Florida e de Di		
	Enter Florida street address		
	, Florida	lZip Code	
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MRG	Milagros Ahmad	1213 US HWY 27 Suite B Clermont FL 34714	■ Add
			Remove
			Change
			Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
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. If amending any other informa	•	ο <i>(</i> π1.	-	ssury.)
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	August	21 2018		
. Effective date, if other than the	date of filing:		(optic	onal)
(If an effective date is listed, the date mus <u>Note:</u> If the date inserted in this bl	ock does not meet the app	licable statutory filing		
document's effective date on the D	epartment of State's recor	ds.		
the record specifies a delayed	d effective date, but	not an effective ti	me, at 12:01 a	.m. on the earlier
) The 90th day after the rec			,	
August 21	2018			
Dated	·	·		
(M . Ca	2001 P.1 m	(/		
	1 1 0 ct - 0 0 1 1			
	signature of a member or an	nthorized representative	of a member	

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Filing Fee: \$25.00