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DIVISION OF CORPORATION

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## **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJE	PORT CIT	Y AUTO EXPERTS, LLC		
CODOL		Name of Lim	ited Liability Company	<del></del>
The end	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	eturn all correspon	ndence concerning this matter	to the following:	
		NORBERT L. WITKOWS	SKI	
			Name of Person	<del></del>
		PORT CITY AUTO EXP	ERTS, LLC	
			Firm/Company	<del></del>
		12731-2 METRO PARK\	WAY	
			Address	
		FORT MYERS, FLORID	A 33966	
			City/State and Zip Code	<del></del>
		DBB@BURNSIDELAW.N		
			to be used for future annual report notifi	cation)
For fur	ther information co	oncerning this matter, please ca	all:	
DERE	K BENJAMIN BE	RETT, ESQ. (FL BAR # 0096		
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
□ \$25	5.00 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

PORT CITY AUTO EXPERTS, LLC				
(Name of the Limited Liability (A Florida I	Company as it now appears on our records.) Limited Liability Company)			
The Articles of Organization for this Limited Liability Co	ompany were filed on JUNE 19, 2018,	and assigned		
Florida document number L1800150933	<u>_</u> .			
This amendment is submitted to amend the following:				
Florida document number L1800150933  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)				
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the	bbreviation "L.L.C."		
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·		
(Principal office address MUST BE A STREET ADDRE	ESS)	<u> </u>		
		SEQ ISIO		
		<b>3</b>		
Enter new mailing address, if applicable:		<b>2</b> 457 <b>5</b> 625		
33.1.100.101.100.010		<del></del>		
		7: RATIO		
B. If amending the registered agent and/or registered agent and/or the new registered office addr	ered office address on our records, enter	the name of the new		
registered agent and/or the new registered bince addr	ess nere:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
	Citv	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>	Name	Address	Type of Action
AMBR	CATHERINE M. WATSON	4314 WABASSO AVENUE	
		NORTH PORT, FL 34287	■ Add
			Change
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			Remove
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	t be specific and cannot be prior to date of filing or	(optional) more than 90 days after filing.) Pursuant to 605.6 ng requirements, this date will not be lister	.0207 ed as
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fan effective date is listed, the date mus  Note: If the date inserted in this bloocument's effective date on the De  The Poth day after the reco	epartment of State's records.  I effective date, but not an effective	time, at 12:01 a.m. on the earlie	er o
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