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(Requ	estor's Name)	
(Addr	ess)	
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(City/s	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Docu	ıment Number)	
Certified Copies	Certificates o	of Status
Special Instructions to Fi	ling Officer:	
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COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	Name of Limited	3V3L Auto Gr Liability Company	Proup
The enclosed Articles of	Amendment and fee(s) are submit	ted for filing.	
Please return all correspo	indence concerning this matter to t	he following:	
	(Divartor lovett	
	NexT	L3V3L Auto (nvar)
	8340	Ulmeitan Ral	30.10218
	Largo, Flui	City/State and Zip Code	
	E-mail address: (to b	e used for future annual report notific	cation)
For further information co	oncerning this matter, please call:		
JHGJHGJKHGKKK Name o	Divartae lovett	at (727) 408-6 Area Code Daytime	SIOG Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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

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ARTICLES OF C	
О	S 20
(Name of the Limited Liability Compa	31 Auto Ornap 3
(A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on June 29 2018 and assigned
Florida document number <u>1/8000/50082</u> .	and along the
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	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 BOX)	B340 Ulmertan Road Site 218 Largo, Florida, 33771
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the new

Name of New Registered Agent:

New Registered Office Address:

8340 Ulmerton Road &

Lay 90 Florida 3377/

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>	Address	Type of Action
MGIR	Micheal Banks	5480 58 Street N Unite 2	A □ Add
		Kenulh City FL. 33709 U	S Remove
			Change
A MGR	Tony leaks	5480 58 Street Nunik 2.	<u> </u>
		Beneth O. t. FL, 33709	U.S. Remove
			Change
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an effective date is listed, ote: If the date inserte	r than the date of fili the date must be specific a ed in this block does not te on the Department of	and cannot be prior t meet the applic	r to date of filing or : cable statutory fili	more than 90 days after	t ional) er filing.) Pursuant to 6 iis date will not be li	05.020 isted a
	a delayed effective or the record is filed		ot an effective	time, at 12:01	a.m. on the ear	lier o
	17,	. 2018	_·			
ated August 1		1	}			
ated <u>August</u>	<i>H</i> .	Lan	orized representativ			

Page 3 of 3

Filing Fee: \$25.00