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COVER LETTER

Division of Co	rporations					
SUBJECT: Boo	+, que Auto Name of Lin	Detail LLC nited Liability Company	 .			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspondent	ondence concerning this matter	to the following:				
	<u>Cr.c</u>	Name of Person		-		
		Firm/Company		-		
	2131 Hegt	twood Ci				
		Address		- 		
	Orlando	F1 32825			E E E	
	Eric Lebron A	Fl 33834 City/State and Zip Code D Ho I mail. On to be used for future annual report notif		SS:	20	
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For further information c	concerning this matter, please co	all:		FLORIDA	AH 8: 92	· .
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Name o	of Person	at () Area Code Daytine	Telephone Number			
Enclosed is a check for the	he following amount:					
\$25.00 Fiting Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status		

MAILING ADDRESS:

TO:

Registration Section

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

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 \$\frac{8}{8} \frac{1}{8}\$ and assigned Florida document number \$\frac{1}{8} \colon \frac{1}{8} \frac{9}{8} \frac{3}{9}\$. 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 "LLC." 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)
Florida document number
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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
SE CONTRACTOR DE LA CON
B. If amending the registered agent and/or registered office address on our records, enter the name of the 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:
Hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with

If Changing Registered Agent, Signature of New Registered Agent

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 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

ANIDK = A	utiorized Wember		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGB	Enc LeBron	2131 Heathwood Cir Orlando F1 30828	DA Add
			Remove
			Change
MGR	Sergio Ramos sr	17162 Old Cheney Huy Odnid Fl 32833	🗆 Add
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Effective date, if othe	r than the date o	f filing:			(optional)		
I an effective date is listed,	the date must be spec	cific and cannot be	prior to date of filir	ng or more than 90 da	vs after filing.) Pur	suant to 6	505.0207
Note: If the date inserted document's effective date.	te on the Departme	is not meet the ap ant of State's rec	opticable statutor ords.	y filing requiremen	its, this date will	not be li	isted as
e record specifies	a delayed effec	tive date, bu	t not an effec	tive time, at 12	:01 a.m. on t	the ear	rlier of
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