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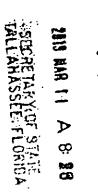
(Requestor's Name)	
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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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MAR 1.2 2019 T. LEMIEUX

COVER LETTER

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SUBJECT:	JA 1 auto Sa Name of Lin	les LL C nited Liability Company	Son Guzman of Person Sales LLC Company 3 Ind Unit 102 dress 2 3 4/04 and Zip Code 2 5 Quail Com future annual report notification) Priling Fee & \$\int \text{S60.00 Filing Fee},
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
Division of Corporations SUBJECT: A who sales 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: Jason Guzman			
	JA	1 auto Sales LL Firm/Company	<u>C</u>
	2340)avis Blad Unit 1	02
	- nafle	City/State and Zip Code	<u> </u>
	E-mail address:	to be used for future annual report notif	ai / . Om ication)
For further information		J	
	Col Person	at (<u>239</u>) <u>784</u> - Area Code Daytime	BB44 Telephone Number
Enclosed is a check for	the following amount:		
S25.00 Filing Fce			☐ \$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



March 4, 2019

JASON GUZMAN 2340 DAVIS BLVD UNIT 102 NAPLES, FL 34104

SUBJECT: JA1AUTOSALES LLC Ref. Number: L19000022891

We have received your document for JA1AUTOSALES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The last page of the amendment was not included.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 919A00004378

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION

: 1A4 aut	Osales LC.	
(Name of the Limited Liability Compar (A Florida Limited L	iv as it now appears in the retords. A 8-11-11-11-11-11-11-11-11-11-11-11-11-11	
	COSTABLY OF STATE	
The Articles of Organization for this Limited Liability Company	were filed on THE CHASSIE and assigned	
Florida document number <u>5003233<i>79875</i></u> .	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty 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 off registered agent and/or the new registered office address here		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	

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 = A	uthorized Member		
Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Linda Gorman	140 OSJREYS Landing	Add
		nafles FL, 34/04	Remove
/ .			Change
AR	Mia, Cararin	3565 Balloa cir	
		nafles FL, 34105	Remove
			Change
MGR	Jason Gulman	2340 Davis Bud Unit 10	DZ_DAdd
		naples FL 34104	□ Remove
			Change
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Effective date, if an offective date is I	other than the date of filing:isted, the date must be specific and cannot be pr	ior to date of filing or more tha	(optional)	
Note: If the date in	iserted in this block does not meet the app	licable statutory filing requ	rements, this date will not be li	sted a
document's effective	ve date on the Department of State's recor	ds.		
	Standard Lander Control of the Contr			
The 90th day	fies a delayed effective date, but after the record is filed.	not an effective time,	at 12:01 a.m. on the ear	lier c
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Dated S	16/2019.			
.	16/2019.			
	Chially.	ethorized representative of a m		
	Sumatura of a mambar or or	thorized representative of a m	mher	
	Signature of a member of ac	anorized representative of a m	inoci	

Page 3 of 3

Filing Fee: \$25.00