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COVER LETTER

TO: Registration Section Division of Corporations	.у		
SUBJECT: (H AUTO	SALES LLC Name of Limited Liability Compa	ny	
The enclosed Articles of Amendment ar	nd fee(s) are submitted for filing.		
Please return all correspondence concer	ning this matter to the following:		
(Charles Harner Name of Pers	wh	
	CH AUTO SALI	ES LLC	
	O Dolphin Fleet Ci	ir Apt 2011	
	ona Blach FL City/State and Zig		
CHI	Huto Sale LLC @ Gr E-mail address: (to be used for future	annual report notification)	
For further information concerning this	matter, please call:		
Charles Harger Name of Person	at (30% Area Coo	Daytime Telephone Number	
Enclosed is a check for the following an	nount:		
\$25.00 Filing Fee \$30.00 F Certific	iling Fee & S55.00 Filing ate of Status Certified Co	opy Certificate of Status	

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

(Name of the Limited Liability (A Florida	ALES LLC Ty Company as it now appears on a Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability C Florida document number <u>LIQOOQ 28 Q8Q</u>	Company were filed on <u>()</u>	17813010	_ and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company here:			
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the design	nation "LLC" or the abbre	viation "L.L.C."	_
Enter new principal offices address, if applicable:			4	_
(Principal office address MUST BE A STREET ADDI	RESS)		1810	ግ ገ
Enter new mailing address, if applicable:	****		EB 27 M	
(Mailing address MAY BE A POST OFFICE BOX)			10 10 3 3 8 10 3 8 10 10 10 10 10 10 10 10 10 10 10 10 10	_ _ _
B. If amending the registered agent and/or registered agent and/or the new registered office add		r records, <u>enter the</u>	e name of the	new
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:

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** 110 Dolphin Fleet Cir Apt 204 Add MGR Charles Harper Daytona Beach FL 32119 - Remove Change □ Add ☐ Remove ☐ Change □ Remove ☐ Change □ Add AHASSEE, FLORID/ ____ Change _□ Add ☐ Remove

☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if nea		
		
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	10: 38	
	—————————————————————————————————————	
E. Effective date, if other than the date of filing:		
If the record specifies a delayed effective date, but not an effective time, at 12:01 (b) The 90th day after the record is filed.	a.m. on the earlie	r of:
Dated $02-20-2019$.		
Dated 02-30-3019		
Chayles Harney Typed or printed bame of signee		

Page 3 of 3

Filing Fee: \$25.00