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## **COVER LETTER**

TO:	Registration Se Division of Cor			
eu <b>n</b> i		Rv & Auto Sales, LLC2023		
SUBJ	EC1:	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	endence concerning this matter	to the following:	
		Cody Snow		
			Name of Person	
			Firm/Company	
		1925 W Beaver st		
		Jax, FL 32209	Address	
		NorthEastrvautosales@gma	City/State and Zip Code ill.com	
		E-mail address; (	to be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please ea	all:	
Cody		C.D.	904 888-2023 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
<b>■</b> \$2	25.00 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

## TO ARTICLES OF ORGANIZATION OF

NorthEast Rv & Auto Sales, LLC (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 Febuary 7, 2019 and assign Florida document number Febuary 15, 2019 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) B. If amending the registered agent and/or registered office address on our records, enter the mame registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume 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

Enter Florida street address

City

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adder removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gregory S Baker	3260 Ricky Dr Jacksonville, FL 32223	
			Change
MGR	Cody Snow	1927 Calusa Trail Middleburg, FL 32068	Add
			□ Remove
			Add
			Remove
			Change Change
			Remove Remove Change
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Filing Fee: \$25.00