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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	cy/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY CONTROL SECRETARY CO

JUL 0 5 2019 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: We Buy Ugly Cars 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:
Reeshemah McCoy-G(ee)
We Buy Usly CARS LLC
8610 N. 16th ST Address
TAMPA, Fl. 33604 City/State and Zip Code
<u>reeshemahmecayo amail, com</u> E-mail address: (to be used for future abnual report notification)
For further information concerning this matter, please call:
Reesheman mcCzy at (813) 401.0896 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Sta

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**

We Buy Us	14 CACS LLC						
(<u>Name of the Limited Liabida</u> (A Florida	v Company as it now appears on our records.) Limited Liability Company)						
	Limited Elability Company)						
The Articles of Organization for this Limited Liability Co	ompany were filed on 6 18 19 and assigned						
Florida document number <u>L 1900004</u>	<u>4</u> 759						
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limit	ted liability company here:						
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."						
Enter new principal offices address, if applicable:							
(Principal office address MUST BE A STREET ADDR.	ESS)						
	A ()						
Enter new mailing address, if applicable:	2 Fm						
(Mailing address MAY BE A POST OFFICE BOX)							
	12						
B. If amending the registered agent and/or regist	ered office address on our records, enter the name of the new						
registered agent and/or the new registered office addre	ess 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:						

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

or removed	Trong our records.		
MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Royale McCoy	8610 N. 16th ST	
		TAMPA, FC. 33604	 Remove
			Change
<u>mgr</u>	BOYAle McCoy	8610 N.16th ST	
		TAMBO, FL. 33604	X Remove
			Change
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			Pemove
			Change
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			Remove
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			□ Add
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			□ Change
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			_ □ Remove
			□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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	of	LAA_	Remove and A Thank	11 We	Buy	Usly	CArs	LLC	
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an effectiv ote: If th	e date is listo ie date inse	ed, the date me erted in this b	te date of filing: ust be specific and colock does not me Department of Sta	cannot be prior to	date of filing le statutory i	or more than ⁹ Illing require	(option 0 days after fil ments, this d	ing.) Pursuant i	io 605,020 e listed a
record The 90	specifie th day af	s a delaye ter the re	ed effective da cord is filed.	ite, but not	an effectiv	ve time, at	: 12 :01 a.r	n. on the e	arlier o
ated	6/1	8/19		2019	<u>-:</u>				
			///~						
			Signature of a me	enter or authori	zed representa	tive of a mem	her		_

Page 3 of 3

Filing Fee: \$25.00