

Division of Corporations

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L19000042870

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BURNS LAW OFFICES, P.A.
Account Number : I20140000036
Phone : (305)733-8223
Fax Number : (866)883-7019

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TALLAHASSEE, FL 32399

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
USA CAR CARRIER LLC**

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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USA CAR CARRIER 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 02/12/2019 and assigned
Florida document number L19000042870.

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)

3280-55A TAMiami TRAIL #257

PORT CHARLOTTE, FL 33952

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3280-55A TAMiami TRAIL #257

PORT CHARLOTTE, FL 33952

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: LAURA E. EASTER

New Registered Office Address: 3280-55A TAMiami TRAIL #257

Enter Florida street address

PORT CHARLOTTE, Florida 33952

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.

DocuSigned by:

Laura E Easter

83758DFE1C0A6A

If Changing Registered Agent, Signature of New Registered Agent

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Identifying Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
or removed from our records: (((1121000067025 3)))

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Antonio Sanchez-Breton	19124 Bobolink Dr	<input type="checkbox"/> Add
		Hialeah, FL 33015	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
President	Constance A. Bennett	1242 SW Knollwood Dr	<input type="checkbox"/> Add
		Palm City, FL 34990	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LAURA E. EASTER	3280-55A Tamiami Trail	<input checked="" type="checkbox"/> Add
		#257	<input checked="" type="checkbox"/> Remove
		Port Charlotte, FL 33952	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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