## K19000071669

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## **COVER LETTER**

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:	GV CORSA LLC		
SUBJECT.		ited Liability Company	·-·-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	KEVIN OTAYEK		
		Name of Person	
	GV CORSA LLC		
		Firm/Company	
	7934 AZTEC COURT		
		Address	
	LAKE WORTH, FL 33463	3	
	<del></del>	City/State and Zip Code	
	GVCORSA@GMAIL.CON		
For further information of	oncerning this matter, please c	to be used for future annual report n	otification)
KEVIN OTAYEK		561 706-3811	
Name o	f Person	at ()	ime Telephone Number
Enclosed is a check for t	he following amount:		
■ \$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)
<u>Mailing Addres</u> Registration		Street Address:	Zaution
Division of C		Registration S	

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GV CORSA LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny <u>as it now appears on our records.)</u> Liability Company)	)
The Articles of Organization for this Limited Liability Company	were filed on <u>03/13/2019</u>	and assigned
Florida document number L19000071689		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
GV AUTOMOTIVE PRODUCTS LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or therabbre ion "L.L.C."
Enter new principal offices address, if applicable:		T T
(Principal office address MUST BE A STREET ADDRESS)		SSE T
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		H 2: 36
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new regist
Name of New Registered Agent:		<del> </del>
New Registered Office Address:	Enter Florida street address	<del></del>
	, Flow	rida Zip Code
	-uii	$\kappa \psi \cup \alpha e$

## 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 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>	<u>Name</u>	Address	Type of Action
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			Remove
			Change ☐ Add
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Effective date, if other than the date of filing: _ If an effective date is listed, the date must be specific and can:	not hu mior to do	C 411	(optio	nal)		)
Note: If the date inserted in this block does not meet document's effective date on the Department of State	the applicable	statutory filing req	uirements, this	date will	not be lis	sted as t
e record specifies a delayed effective date, but not an ord is filed.	effective time, a	at 12:01 a.m. on the	e earlier of: (b)	The 90	th day afi	er the
Dated JUNE 12 2	022					
M	~~	representative of a i				
Signature of a mem	iber or authorized	l representative of a i	nember			