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To:

Division of Corporations

Pax Number

Pax Number

: (850)617-6383

From:

Account Name : DEALER CONSULTING SERVICES, INC.

Account Number : 120010000121 Phone : (305)758-9001

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

: (786)410-6035

Email	Address	t
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OMB AUTO SALES L.L.C.

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Corporate Filing Menu

P.O. Box 6327

Tallahassee, FL 32314

COVER LETTER

	Registration Se Division of Cor			
CIO IE		O SALES L.L.C.		
SUBJEC	UI:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	etum all correspo	endence concerning this matter	to the following:	
		Ana Vizcaino		
			Name of Person	
		Dealer Consulting Services	•	
		7537 NW 7th Ave	Firm/Company	
		<u> </u>	Address	
		Miami, FL 33150		
		CORPORATIONS@DCS-	City/State and Zip Code NETWORK.COM	fication)
		E-mail address: (to be used for future annual report not	fication)
For furt	her information o	concerning this matter, please of	all:	
Ana Viz	zcaino		305 758-9001	
-	Name o	f Person		e Telephone Number
Enclose	d is a check for t	he following amount:		
\$25	.00 Filing Foc	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filling Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist	ING ADDRESS: ration Section on of Corporations	STREET/COUR Registration Section Division of Corpo	ол

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

H190007074533

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OMB AUTO SALES L.L.C.				
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on o nited Liability Company)	ur records.)	- -	
The Articles of Organization for this Limited Liability Com Florida document number <u>L19000105391</u>	pany were filed on 04/17/20	119	_and assign	ædi
This amendment is submitted to amend the following:	•			
A. If amending name, enter the new name of the limited	l liability company here:			
The new name must be distinguishable and contain the words "Limited	Liability Company," the designa	tion "LLC" or the abbre	viation "L.L.C	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRES	<u>(S)</u>		6	
	****			— 、
Enter new mailing address, if applicable:		-	9 5 5 J	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)			77	
			======================================	`
B. If amending the registered agent and/or registered agent and/or the new registered office address	ed office address on our s here:	records, enter th	e name of	the ner
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida str	reet address	<u>.</u>	
		Florida		
	Ciry	, =	Zip Code	
No	mant.			

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

Page 1 of 3

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

Title	Name	Address	Type of Action
AMBR	WEDNEY MARCIER	1569 NW 7TH TERRACE, POMPANO BEACH, FL 33060	
			Remove
AMBR	WILMARCK BENJAMIN	4354 NW 9TH AVE APT 188, POMPANO BEACH, FL 33064	D Add
			B Remove
			Change
MBR	WILKY LOUIS	5541 PRISCILLA LN, LAKE WOTH, FL 33463	■ Add
			Change
			☐ Remove
			Change
			C3 Add
			□ Remove
			Change
			□ Remove
			Change

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	= :	'.
Effective date, if other than the dat	re of thing:	<u>—</u>
Note: If the date inserted in this block document's effective date on the Depar	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant does not meet the applicable statutory filing requirements, this date will not truent of State's records.	be listed as the
the record specifies a delayed ef) The 90th day after the record	fective date, but not an effective time, at $12\!:\!01$ a.m. on the is filed.	earller of:
Dated August 29, 2019		
	James MILO	
	Maria	
Sig	nature of a member or alabbrized representative of a member	
Amsley Orclus	Typed or printed name of signee	

Page 3 of 3

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