Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DOMINIUM CONSULTING SERVICES, LLC

Account Number : I20180000103 Phone : (407)374-2329

: (407)412-5926 Fax Number

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

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SPECT RENT A CAR LLC

Certificate of Status	0
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COVER LETTER

	gistration Sec vision of Corp										
CHD ICCT.	SPECT REN	FT A CAR LLC									
SUBJECT		Name of Limi	ted Liability Company								
The enclosed	d Articles of A	smendment and fee(s) are subt	nitted for filing.								
Please return	all correspor	idence concerning this matter t	o the following:								
		CLEITON CARDOSO									
			Name of Person								
		DOMINIUM CONSULTI	NG SERVICES								
			Firm/Company								
		6965 PIAZZA GRANDE A	AVE - SUITE 206								
		Address									
		ORLANDO FLORIDA 32	835								
		City/State and Zip Code									
		SERVICES@DOMINIUM									
		E-mail address: (to be used for future annual report notifi	cation)							
For further i	information co	oncerning this matter, please co	ill:								
CAMILA			407 374-2329 at ()								
	Name of	Person	Area Code Daytime	Telephone Number							
Enclosed is	a check for th	e 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							

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 Page: 5 05/8/2020 09:52 AM TO:18506176383 FROM:3213199949

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPECT RENT A CAR LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our r Liability Company)	ecords.)	
The Articles of Organization for this Limited L Florida document number <u>L19000122891</u>	iability Company	were filed on 05/06/2019	·	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	oility company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation	"LLC" or the abbr	reviation "L.L.C."
Enter new principal offices address, if applicable:		10195 ANCORA CIRCL		
(Principal office address MUST BE A STREE		ORLANDO, FL 32821		
Enter new mailing address, if applicable:		10195 ANCORA CIRCI		2020 SEC
(Mailing address MAY BE A POST OFFICE BOX)		ORLANDO, FL 32821	<u>`</u>	HAY -
B. If amending the registered agent and registered agent and/or the new registered o	/or registered o	office address on our re	cords, enter 10 OR IDA	he nature of the ne
Name of New Registered Agent:	CESAR VASO	CONCELOS MATTOS		
New Registered Office Address:	10195 ANCOF	RA CIR APT 2423 Enter Florida street	addent	
	ORLANDO,		Florida _328	21
		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

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	GILSOLON RAMOS DE OLIVEII		Add
			■ Remove
			☐ Change
AMBR	CESAR V MATTOS	10195 ANCORA CIR APT 2423	Add
		ORLANDO, FL 32821	☐ Remove
			Change
AMBR	ALEX COLOMBINI	214 COMMERCIAL ST, St 204 A.	
		MALDEN, MA. 02148	Remove
			Change
			☐ Remove
			Change
			Add
			□ Remove
			Change
			□ Remove
			Change

9 :	7	05/8/2		09:52			850617			: 32131			
D.	If ame	ending any c	other info	ormation,	enter c	hange(s)	here: (A	atach ad	ditional s	heets, if n	ecessary	.)	
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E.	Note:	ive date, if (fective date is I If the date ir	iserted in	this block (does not	meet the a	applicable	ate of filing	or more th	on 90 days : uirements.	ptional) ifter filing, this date) Pursuant to will not be	605.02 listed a
	docum	nent's effectiv	re date on	the Depart	iment of	State's re	cords.						
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	Dated	MAY 8TH				2020	<u></u> .						
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Typed or printed name of signee

Filing Fee: \$25.00