

L19 000132514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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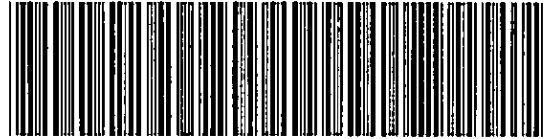
(Business Entity Name)

(Document Number)

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JAN 09

2019 DEC -4 PM 4:30

FILED

Amend ✓
N/C

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Supreme Auto Finance, 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:

ARSHIA HASSANI
Name of Person
Supreme Auto Finance, LLC
Firm/Company
7300 Beach Blvd, Unit 6
Address
JACKSONVILLE, FL 32216
City/State and Zip Code
H-ARSHIA@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ARSHIA HASSANI at 904 962-6206
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:

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

Supreme Auto & Finance 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 5-20-2019 and assigned
Florida document number L19000132514

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Supreme Auto & Finance LLC

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)

7300 Beach Blvd unit 6
JACKSONVILLE, FL 32216

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7300 Beach Blvd Unit 6
JACKSONVILLE, FL 32216

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:

ARSHIA HASSANI

New Registered Office Address:

7300 Beach Blvd Unit 6

Enter Florida street address

JACKSONVILLE Florida 32216

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

[illegible]

12-2-19

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 12-2-2019.

12-2-

Arshia Hassan

Typed or printed name of signee