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COVER LETTER

TO: **Registration Section** Division of Corporations

DMH AUTO LLC

SUBJECT:

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:

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

	RODRIGUEZ, ERNESTO)	
Name of Person			
	DMH AUTO LLC		
		Firm/Company	
	11053 WINDSONG CIR _APT 204		
		Address	
	NAPLES, FL 34109		
	dmhautollc@gmail.com	City/State and Zip Code	
		to be used for future annual report notif	fication)
For further information co	oncerning this matter, please c	-	
RODRIGUEZ, ERNEST	o	239 910-37-36 at ()	
Name of Person		Area Code Daytime Telephone Number	
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	S30.00 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)
	NG ADDRESS: ation Section	STREET/COURI Registration Sectio	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DMH AUTO LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

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 "LLC"

Enter new principal offices address, if applicable:	<u> </u>	<u>2</u> 2 1 3
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		

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

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
		florida
	Ciņy	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

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

. ı.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	RODRIGUEZ. ERNESTO	11053 WINDSONG CIR APT 204	Add
		Naples, FI 34109	Remove
· <u> </u>			🗆 Add
			🖸 Remove
			Change
			🖸 Add
			C Remove
			Change
<u> </u>			
			Remove
			D Change
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			🛛 Remove
			Change
			Add
			Remove
			Change

• • D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: _________(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) 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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	September 9	2019
	K	Signature of a member or authorized representative of a member
	RODRIGU	EZ, ERNESTO

Typed or printed name of signee