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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

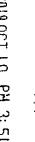




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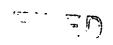
C. GOLDEN 0CT 3 0 2019

COVER LETTER

TO: Registration Se Division of Cor			
	E MOTORS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filling.	
Please return all correspo	ondence concerning this matter	to the following:	
	LINA MARIA GONZALE	Z BETANCUR	
		Name of Person	
	PRESENCE M	1070KS LLC Firm/Company	
	13905 FAIRWAY ISLAN	DIDRIVE UNIT 1015	
		Address	
	ORLANDO, FL 32837		
	presencemotors@gmail.con	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	all:	
LINA MARIA GONZA		407 723 3392	
Name o	of Person	at ()	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Fitting Fee & Certified Copy (additional copy is enclosed)	☐ \$60 00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mall	INC AIMMERC.	STDE ET/CARDII	ED ANNUESS.

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



PRESENCE MOTORS LLC

2019 OCT 10 PH 3: 54

(Name of the Limite)	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia Florida document number L19000216137	and assigned and assigned
This amendment is submitted to amend the follow	
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıbie:
(Principal office address MUST BE A STREET	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	<u> </u>
B. If amending the registered agent and/oregistered agent and/or the new registered off	or registered office address on our records, enter the name of the . fice address here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	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

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	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Juan Quintero	13905 FAIRWAY ISLAND DRIVE UNIT 1018	∃ Add
		ORLANDO, FL 32837	
			Remove
			Change
			□ Add
			□ Remove
			☐ Change
			☐ Remove
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			Add
			☐ Remove
			□ Change

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ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this bloocument's effective date on the December 1.	ock does not meet the applicabl	date of filing or more than 90 e e statutory filing requirem	_ (optional) lays after filing.) Pursuant to 60 ents, this date will not be lis	05.0207 sted as
e record specifies a delayed The 90th day after the reco		an effective time, at 1	2:01 a.m. on the ear	lier o
September 27	2019	. /		
				
	1/1/1/1////////////////////////////////	4M5		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00