

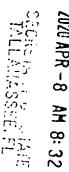
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PICK-UP	☐ WAIT	MAIL
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APR 22 2020

C Kinsey

COVER LETTER

TO: Registration Division of C		
	AL FLORIDA AUTO MART LL	С
SUBJECT:	Name of Lim	ited Liability Company
The enclosed Articles	of Amendment and fee(s) are sub	emitted for filing.
Please return all corres	pondence concerning this matter	to the following:
	ZACHARY PRADOS	
		Name of Person
	CENTRAL FLORIDA AL	JTO MART LLC
		Firm/Company
	4390 W COLONIAL DR	IVE
		Address
	ORLANDO, FL 32808	
		City/State and Zip Code
	CFLAUTOMART@GMAI	
For further information	t:-mail address: (n concerning this matter, please c	to be used for future annual report notification) all:
ZACHARY PRADOS	-	407 810-5564
Name	e of Person	at ()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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addi Registration		Street Address: Registration Section
	Corporations	Division of Corporations
P.O. Box 6. Tallahassee		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CENTRAL FLORIDA AUTO MAI	RT LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Li Florida document number <u>L19000236864</u>	ability Company	were filed on 09/19/2019	and as	ssigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	oility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabi	ility Company," the designation "LLC" o	or the abbreviation "	I,.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		4390 W COLONIAL DRIVE	<u> </u>) >
		ORLANDO , FL 32808	72 2	**************************************
				, , ,
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4390 W COLONIAL DRIVE	ASSER	- 1
		ORLANDO , FL 32808	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
B. If amending the registered agent and/or r		address on our records, <u>enter th</u>	e name of the no	ew register
Name of New Registered Agent:	ZACHARY PF	RADOS		
New Registered Office Address:	4390 W COL	ONIAL DRIVE		
		Enter Florida street address	 	
	ORLANDO	, Flori	ida <u>32808</u>	
		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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: (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 State: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. 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 ord is filed. APRIL 6 2020 Signature of a member or authorized representative of a member						_
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Filing Fee: \$25.00