L200000 51361

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S. YOUNG

COVER LETTER

ŤО:	Registration Se Division of Cor		•	
eum re		Chacao LLC	•	
SUBJE	CI;	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Andres Betancourt		
			Name of Person	
		Toyo Parts Chacao LLC		
			Firm/Company	
		60 NE 14th St Apt 1123		
			Address	
		Miami FL 33132		
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		halvinglle@gmail.com		
		E-mail address: (to be used for future annual report no	tification)
For furtl	her information c	oncerning this matter, please c	all:	
Andres	Betancourt		786 6238982	
Name of Person			ne Telephone Number	
Enclose	d is a check for th	ne 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:		Street Address:	action	
Registration Section Division of Corporations		Registration Se Division of Co		
	P.O. Box 632	-	The Centre of	
	Tallahassee, I	PL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Toyo Parts Chacao LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on o	ur records.)	75.	-s1
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000051361</u> .			:and ass	igned
This amendment is submitted to amend the following:		PH 6: 30	فملارب	
A. If amending name, enter the new name of the limited liab	ility company here:		30	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designa	tion "L.L.C" or the ab	breviation "L.	L.C."
Enter new principal offices address, if applicable:				
(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 a agent and/or the new registered office address here:	address on our record	s, <u>enter the nam</u>	e of the nev	v register
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida str	eet address		
		, Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my d provided for in Chapt	uties, and I am j er 605, F.S. Or,	familiar wit if this docu	h and ment is

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>	<u>Address</u>	Type of Action
MNG	Andres Betancourt	60 NE 14th St Apt 1123 Miami, FL 33132	≣ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		·-	□Add
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(If an effectiv <u>Note:</u> If th	date, if other than e date is listed, the date he date inserted in the s effective date on the	e must be specific ar is block does not	nd cannot be prior to meet the applica	o date of filing or mor	optiona (optiona e than 90 days after filis requirements, this da	l) ng.) Pursuant to 605,0207 (3 te will not be listed as th
f the record specord is filed.	ecifies a delayed effe	ective date, but no	ot an effective tin	me, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
Dated Apr	il 4		2020			
Dated	•	Lance				

EU E ASEAG

Typed or printed name of signee