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2020-07-21 19:13:41 (GMT)

Kurkin Forehand Bran From Kurkin Forehand Brandes -

Division of Corporations

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : KURKIN FOREHAND BRANDES, LLP.
Account Number : I20090000016
Phone : (850)391-5060
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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2020, 7/21 3:32

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FLORIDA CARS SOUTH, LLC

Table with 2 columns: Description and Value. Rows include Certificate of Status (0), Certified Copy (0), Page Count (04), and Estimated Charge (\$25.00).

2020, 7/21 3:30

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

2020 07 21 PM 3:30

FLORIDA CARS SOUTH, 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 July 9, 2020 and assigned
Florida document number L20000195698.

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 "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 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:

New Registered Office Address:

_____ *Enter Florida street address*

_____ **Florida** _____

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	HUFFINGTON, MICHAEL	1700 EL JOBEAN ROAD	<input type="checkbox"/> Add
		PORT CHARLOTTE, FLORIDA 33948	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	HUFFORD, MICHAEL	1700 EL JOBEAN ROAD	<input checked="" type="checkbox"/> Add
		PORT CHARLOTTE, FLORIDA 33948	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

