# Florida Department of State

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

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Certificate of Status	0
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO:

Registration Section

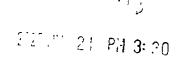
Tallahassee, FL 32314

## **COVER LETTER**

Division of Cor	porations		
	rs South, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	William C. Diaz-Rousselo	ı	
		Name of Person	<del></del>
	Kurkin Forehand Brandes	LLP	
		Firm/Company	
	18851 NE 29 Avenue, Sui	te 303	
		Address	<del></del>
	Aventura, Florida 33180		
		City/State and Zip Code	<del></del> .
	·•	oarent@gmail.com, carrie@yellowr	
		to be used for future annual report notif	fication)
For further information of	concerning this matter, please ca	116:	
William C. Diaz-Rousse	lot, Esq.	305 929-8509 at ( )	
Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne 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)
Mailing Addres Registration 9		Street Address: Registration Sec	ction
Division of C	forporations	Division of Cor	porations
P.O. Box 632	.7	The Centre of T	allahassee

2020-07-21 19:13:41 (GMT) Kurkin Forehand Bran From: -Kurkin Forehand Brandes - (((H20000236375 3)))

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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 1.20000195698 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: (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

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>	Address	Type of Action
AMBR	HUFFINGTON, MICHAEL	1700 EL JOBEAN ROAD	
		PORT CHARLOTTE, FLORIDA 33948	■Remove
			]Change
AMBR	HUFFORD, MICHAEL	1700 EL JOBEAN ROAD	<b>≡</b> Add
		PORT CHARLOTTE, FLORIDA 33948	🗆 Remove
			= Change
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i ani ciicci	e date, if other than the date of filing:  July 9, 2020  (optional)  tive 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 605,020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as at's effective date on the Department of State's records.
<u>Note:</u> If i	
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