## 120000280191

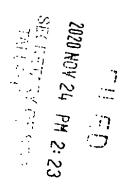
(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Rus	siness Entity Nar	ne)
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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JA. 1/11/21

## **COVER.LETTER**

TO: Registration Section

Div	ision of Corp	oorations		
enn neew	JONAH'S A	UTO WHOLESALE LLC		<b>.</b>
SUBJECT:	-,	Name of Limit	ed Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return	all correspor	idence concerning this matter t	o the following:	
		ED	WARD MEJIA	
			Name of Person	<del></del> -
		TAX BU	REAU SERVICE CORP	
			Firm/Company	
		1835 N	W 112ND AV SUITE 164	
			Address	
		MIAMI	FL 33172	
			City/State and Zip Code	
		EDMEJIA@TBSTAX.NET	o be used for future annual report no	tification)
For further	information e	oncerning this matter, please ea		,
		one or many the same of provider of	646 996-4212	
EDWARD		CD		me Telephone Number
	Name o	f Person	Area Cour Days	me receptione realized
Enclosed is	a check for th	ne following amount:		
<b>■</b> \$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)
R	ailing Addres	Section	Street Address: Registration S Division of Co	
	ivision of C .O. Box 632	Corporations 27	The Centre of	Tallahassee
	allahassee,		2415 N. Moni	roe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JONAH'S AUTO W	HOLEALE LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our lability Company)	records.)	<u>.</u>
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000280191</u> .	were filed on SEP 8, 2020	)	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	n "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applicable:	1220 HUFFSTETLER DR SUITE 202		
(Principal office address MUST BE A STREET ADDRESS)  EUSTIS FL 32726			
		<u>ده</u> ۱	202
Enter new mailing address, if applicable:	1220 HUFFSTETLER D	DR SUITE 202	= 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1
(Mailing address MAY BE A POST OFFICE BOX)	EUSTIS FL 32726	- 2,	4-
(maning duaress may be a two or recomony			3 ,7
		:	<i>8</i>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records,	enter the name o	fifte new register
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street	t address	
		Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office.	e performance of my dut provided for in Chapter	ues, and Lam Jan : 605, F.S. Or. if	uuar with ana this document 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

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

. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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Note:	we date, if other than the date of filing:
e recon	d 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 ed.
Dated [	November of Th. 2020.
	Aghin Collato
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00