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S. YOUNG

COVER LETTER

·ro:

Tallahassee, FL 32314

· TO: 'Registration Section Division of Corporations	
SUBJECT: Name Change	for Ocala Junk 11c. of Limited Liability Company
The enclosed Articles of Amendment and fee(s) a	re submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Stepho	Name of Person
<u> Beala</u>	Junk & Auto Sales 11c.
_5910	SW 112TH Place Rd
<u> Ocal</u>	a, Fl 3447Le City/State and Zip Code
beyere E-mail add	fress: (to be used for future annual report notification)
For further information concerning this matter, plo	ease call:
Stephen Baer Name of Person	at (<u>352</u>) <u>207-3042</u> Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$30.00 Filing Fee Certificate of Star	
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

0	F	
(Name of the Limited Liability Compa	Ny as it now appears on our records.)	TI I
(A Florida Limited I The Articles of Organization for this Limited Liability Company	Liability Company)	DZ Osa and essigned
This amendment is submitted to amend the following:		31
A. If amending name, enter the new name of the limited liabile of the limited liabile new name must be distinguishable and contain the words "Limited Liabile of the new name must be distinguishable and contain the words "Limited Liabile of the new name must be distinguishable and contain the words "Limited Liabile of the new name of the limited liabile of the new name of the new name of the limited liabile of the new name of the	ales IIc.	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	5910 SW 116	7TH Place Rd 34476
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:	ddress on our records, <u>enter th</u> o	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Floric	daZip 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 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>	Name	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
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record : d is filed	specifies a delaye 1.	d effective da	ate, but not a	an effective	time, at 12:0	i a.m. on the e	earlier of: (b)	The 90th day a	fter the
	actobe	21	<u> </u>	2020	<u>)</u> .				
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Dated _			June	معك	yer	entative of a me			

Filing Fee: \$25.00