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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HOP AUTO Notive Sales LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fée(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
Michael T LANCE
HOP AUTO MOTIVE SALES LLC Firm/Company
720 S Hepkins Ave
Titus Vive FL 32780 City/State and Zip Code
HARAGONOTIVE SALES FLE G. MAIL. COM. E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael TLANESE at (263) 910-571 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Taltahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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Hop Automotiv	e Sales LLC.
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Li Florida document number <u>L 2000 29</u>	
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applications	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>
	
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office address on our records, <u>enter the name of the new registered</u> ss here:
Name of New Registered Agent:	DIANE Pelsednino LANESC.
New Registered Office Address:	3005 Clataul Lunce Enter Florida street address
	Titusville Florida 32796

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. Thereby 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 = Man $AMBR = Auth$	ager iorized Member		Sea			
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	1 Herrie	Signature of a	member or auth	orized represent	nive of a mem	ber	•	