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COVER LETTER

TO: Registration Sec Division of Corp	tion orations		
	E.D A	uto Dealer L(
SUBJECT:	Name of Lir	nited Liability Company	
	t to the control	hamittad for filing	
	amendment and fee(s) are sul		
Please return all correspon	dence concerning this matter	to the following:	
	Javie	Molinares Name of Person	
		Auto Dealey Firm/Company	LLC
		Firm/Company	
	13853	Sw 142 nd A	AVC Uni+#49
	(u +1e	Address Address Address Address Address A bay / FL 3318 City/State and Zip Code to be used for future annual report notification all:	36 77 172 NOV
		City/State and Zip Code	Ξ
	E-mail address: (to be used for future annual report notification	
For further information co	ncerning this matter, please c	all:	48
	Molinare	S = 31,786,344-48	360
Name of	Person	Area Code Daytime Telep	hone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & E Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Address:	
Registration Se	ection	Registration Section Division of Corporati	ons
Division of Co P.O. Box 6327	rporations	The Centre of Tallaha	issee
Tallahassee F		2415 N. Monroe Stree	et, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E.D Auto Dealer 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 10/07/2020 and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Genesis Community Developers, LLC

The new name must be distinguishable and contain the words "Limited Liability Company." the designation "L.L.C." 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: Javier Molinares Guidet Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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>	Type of Action
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		13853 SW IWD A	Je Unit#49
		Cutter Bay, Fl 3	
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