L20000311134

(Ře	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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2022 NOV -3 AM 8: SECONDINATED TO TALLAHASSEE, F

. CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

E.D AUTO DEALE	R LLC			
<u> </u>				
				
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
		ł		Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
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				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
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				Driving Record
Requested by: SETH	11/01/22			UCC 1 or 3 File
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COVER LETTER

TO:	Registration Se Division of Cor					
SUBJE	·CT·	F. J. A. Ja	Dodo-110	•		
CODSL			ited Liability Company			
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please 1	return all correspo	indence concerning this matter	to the following:			
		Elizabel	Name of Person			
			Name bi Person			
		E.D.	tota Dodor LLC			
			Firm/Company			
		12050 0.1				
		12822 61	Nund Ave Unit 49	<u> </u>		
		<u> </u>	City/State and Zip Code			
		E-mail address: (to be used for future annual report noti	lication)		
For furt	her information c	oncerning this matter, please c		•		
		3				
El?	sabeth Yelozo	grez	at (<u>786</u>) <u>440-22</u>			
	Name o	l Person	Area Code Daytim	e Telephone Number		
Enclose	d is a check for th	e following amount:				
□ \$25	i.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addres		Street Address:			
	Registration S		Registration Section			
	Division of C P.O. Box 632		Division of Cor The Centre of T			
	Tallahassee, I			Street, Suite 810		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



October 31, 2022

CAPITAL CONNECTION

SUBJECT: E.D AUTO DEALER LLC

Ref. Number: L20000317734

We have received your document for E.D AUTO DEALER LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name on the Articles of Amendment must match DOS records.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 322A00024336



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 NOV -3 AM 8: 56

E.D AUTO DEALER LLC		SEUNE MANY SEE. FL.
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)	MELIANASSEE. FL
The Articles of Organization for this Limited Liability Company	were filed on <u>\0/07/2020</u>	and assigned
Florida document number 120000317734		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" 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 a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
		la.
	City	laZip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	e to act in this capacity. I furthe	er 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>	Address	Type of Action
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		-	□Remove
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an effective <u>ote:</u> If th	ate, if other than date is listed, the date date inserted in thi effective date on th	must be specific a s block does not	nd cannot be price meet the appl	icable statutory	or more than 90 filing requiren	(optional days after filinents, this da	ng.) Pursuant to 6	505.0207 isted as
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