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COVER LETTER

Division of Cor			4.		
SUBJEÇT: Automotive	e Consultants L.L.C.				
SUBJECT.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Michael Jackson				
		Name of Person			
Automotive Consultants, L.L.C.					
		Firm/Company			
	2920 NW 17th Terrace				
		Address	•		
	Cape Coral, FL 33993				
		City/State and Zip Code			
	jackson20rb@gmail.com F-mail.address: (to be used for future annual report notit	(cation)		
For further information c	oncerning this matter, please c				
	The state of the s	••••	•		
Michael Jackson		at (716) 969-6707			
Name o	f Person	Area Code Daytime	e Telephone Number		
Enclosed is a check for the	ne following amount:				
□ \$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)		
Mailing Addres	s:	Street Address:			

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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 OF

Automotive Consultants, L.L.C.		
(Name of the Limited Liability Compa (A Florida Limited i	ny as it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Company	were filed on October 9, 2020	and assigned
Florida document number <u>L20000319813</u>		
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 "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	·	t ·
	·· -	•
Enter new mailing address, if applicable:		,
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
The state of the s		· · ·
		•••
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address 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	
	Florid	
	City	Zip 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 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
MGR	Lifeisagrind, LLC	2920 NW 17th Terrace	■Add
		Cape Coral, FL 33993	□Remove
			□Change
MGR	Empowered, LLC	3801 Ridgeland Court	
		Punta Gorda, FL 33982	□ Remove
MGR	FLA818, LLC	26602 Barranquilla Ave	Add
		Punta Gorda, FL 33983	
			□Add
			□Remove
			□ Change
		 	
			Петюче
		, 	
			□Add
			□Remove
			□Change

	•
ective date, if other than the date of filing: $\frac{02-07-20}{100}$	23 (optional) or to date of filing or more than 90 days after filing.) Pursuant to 605.0
e: If the date inserted in this block does not meet the appl	icable statutory filing requirements, this date will not be listed
ument's effective date on the Department of State's record	is.
cord specifies a delayed effective date, but not an effective	time, at 12:01 a.m. on the earlier of: (b) The 90th day after
s filed.	mile, at 12.01 a.m. on the earner of, (o) The sources after
ed February 07 2023	<u></u> .
11/1/1///	
Signature of a member or and	thorized representative of a member

Filing Fee: \$25.00