## 120000339217

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

CCA COA	STAL AUTMOTIVE, LLC		
50bacc1	Name of Limi	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	JESSICA G. MCGREW		
		Name of Person	
	MCGREW LAW FIRM		
		Firm/Company	<del> </del>
	2810 REMINGTON GREE	EN CIRCLE	
	<del></del>	Address	
	TALLAHASSEE/FL 3230	80	
		City/State and Zip Code	
	sfeddon@gmail.com		<del></del>
	E-mail address: (	to be used for future annual report noti	heation)
For further information	concerning this matter, please ca	all:	
JESSICA G . MCGRE	W	850 765-7764 at ()	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
■ S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Cor The Centre of 7 2415 N. Monro Tallahassee, FI	rporations Fallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CCA COASTAL AUTOMOTIVE LLC

(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on d Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Compa	ny were filed on OCTOI	BER 26, 2020	and assigned
Florida document number L20000339217			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lis	ability company here:		
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the design	nation "LLC" or the abbrev	viation "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 MAV RF A POST OFFICE ROX)			
		DS.	202
B. If amending the registered agent and/or registered office	ce address on our reco	rds, enter the name.o	舌 TI of the new registers
agent and/or the new registered office address here:		S. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	6
		الله ت	
Name of New Registered Agent:		، تے این	<del></del>
New Registered Office Address:		Alo	12
	Enter Florida	street address	
		, Florida	
	City		Zip Code
lew Registered Agent's Signature, if changing Registered Age	<u>ent:</u>		
house, assent the appointment as registered agent and	agree to act in this can	acity I further agree	to comply with t

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany 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	HOWARD FEDDON	1724 W JEFFERSON ST	<b>=</b> Add
		QUINCY FL 32541	□Remove
	<del></del>		□Add
			□Remove
			□Change
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ffecti	ive date, if other than the	date of filing:	6.61	(optio	nal)
an eff Note:	fective date is listed, the date mus If the date inserted in this blo	t be specific and cannot be ock does not meet the a	e prior to date of filing of property to the property of the p	or more than 90 days after the filing requirements, this	date will not be listed as
ocum	nent's effective date on the De	epartment of State's rec	cords.		
record d is fil	rd specifies a delayed effectiv led.	e date, but not an effec	tive time, at 12:01 a	.m. on the earlier of: (b)	The 90th day after the
Dated	NOVEMBER 9	2020	·		
		_	EDALL	3296 ative of a member	
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Filing Fee: \$25.00

Typed or printed name of signee