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To:			
	Division of Corporations Fax Number : (850)617-6383		
	Fax Number : (850)617-6383		
From:			
	Account Name : GILMAN CIDCIA	INC.	
	Account Number : 120120000051		
	Phone : (305)937-7773 fax Number : (815)301-2897		
	Fax Number : (815)301-2897		
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Electronic Filing Menu

Estimated Charge

Corporate Filing Menu

Help

2021 HAR 23 FH 12: 24

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAR GIANTS LLC	•
(Name of the Limited Liability Company as it now (A Florida Limited Liability Cor	appears on our records.) npany)
The Articles of Organization for this Limited Liability Company were filed	on 01/26/2021 and assigned
Florida document number 1.21000048718	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liability comp</u>	any here:
The new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2021
(Principal office address MUST BE A STREET ADDRESS)	
	23 23 23
Enter new mailing address, if applicable:	
	2. 25 2. 25
and on the second	
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	n our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	nter Florida street nidress
	Florida Zip Code
f'ite	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 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>Fitle</u>	Name	Address	Type of Action
AMBR	LEVY, JOE	2875 NE 191 STREET	□Add
		STE 601	■Remove
		AVENTURA, FL 33180	
AMBR	ASAF JOSEPH LEVY	2875 NE 191 STREET	
		STE 601	□Remove
		AVENTURA, FL 33180	Change
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document's effective date of	the Departmen	nt of State's recor	rds.	, , ,		
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Dated 3/23		2024				
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