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(Business Entity Name)
(Document Number)
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Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

CUBICOT. DI ANCOS	MOTOPS LLC					
SUBJECT: BLANCO'S	Name of Lim	ited Liability Company				
	Amendment and fee(s) are sub					
	LILY CALDERON	Name of Person				
	SHOMAR ACCOUNTING					
	7777 NW 146TH ST	Address	 	2021 A		
	MIAMI LAKES, FL 3301	6 City/State and Zip Code		2021 APR 26 PH:		
	LILY@SHOMARACCOU	NTING.COM to be used for future annual report noti	(AC)	ച്ച് ധ		
For further information co	ncerning this matter, please ca	·	TAI	PM 3: 33		
LILY CALDERON Name of	Parson	at (305) 825-1123 Area Code Daytim	e Telephone Number	-		
Name of	reison	Area Code Payini	e reteptione isamoer			
Enclosed is a check for the	e following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of St Certified Copy (additional copy is o	cate of Status &		
Mailing Address Registration S Division of Co P.O. Box 6327	ection orporations	Street Address: Registration Sec Division of Cor The Centre of T	porations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLANCO'S MOTORS, 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 03/31/2021 and assigned Florida document number L21000149925 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FAST LANE AUTO FIRM, LLC The new name must be distinguishable and contain the words "Limited Liability 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) \frac{1}{20} 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: Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address , Florida _

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
			
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Filing Fee: \$25.00