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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
P.CK-99 WAIT MAIL
(Business Entity Name)
(í Jocument Number)
Certified Copies Certificates of Status
Special instructions to Filing Officer

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

5/14/2021

NAME:

ATLANTIC COAST MOTOR SALES, LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Division of Co	rporations					
Atlantic C SUBJECT:	oast Motor Sales, LLC					
Name of Limited Liability Company						
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	Sandra M. Cornish					
		Name of Person				
	Atlantic Coast Motor Sales	, LLC				
		Firm/Company				
	265 South Federal Highway	y #332				
		Address				
	Deerfield Beach, FL 3344	I				
		City/State and Zip Code				
	cornishb@bellsouth.net					
		o be used for future annual report notific	ation)			
For further information of	concerning this matter, please ca	III:				
Sandra M. Cornish		954 263-3918				
Name o	of Person		elephone Number			
Enclosed is a check for the	he 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

Mailing Address:

TO: Registration Section

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

Street Address:

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

	and as	. !
		signed
or the abbrev	iation "I	L.C.''
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	or the abbrev	1.1

ered Agent's Signature, If changing Registered Agent:

ATLANTIC COAST MOTOR SALES LLC

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 rémoved from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	Sandra M. Cornish	265 S.Federal Hwy #332, Deerfield Beach, FL 3344	l ≅Add
			□Remove
			Change
			_ 🗆 Add
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			Remove
			□Change

Effective date, if other than the date of filing: [an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (Monte; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed. Dated	Sunbiz.		
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d is filed.	vote: It the date	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	207 (3 as th
Signature of a member or authorized representative of a member		a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	he
Signature of a member or authorized representative of a member	ated	May 7, 2021.	
		Signature of a member or authorized representative of a member	

Filing Fee: \$25.00