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COVER LETTER

TO:		istration Sect sion of Corp			, ,	
CHD IE	CT.	VENICE CARS, LLC				
SUBJE	CI:		Name of Lim	ited Liability Company		
The encl	losed	Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please re	eturn	all correspon	dence concerning this matter	to the following:		
			ROBERT SHELBOURNE	i.		
				Name of Person		
			VENICE CARS, LLC			
				Firm/Company		
2105 Calusa Lakes Boulevard						
				Address		
			Nokomis, FL 34275			
				City/State and Zip Code		
			GT3RS550@GMAIL.COM			
			E-mail address: (to be used for future annual re	port notification)	
For furth	ier in	formation cor	ncerning this matter, please ca	ıll;		
ROBER	RTSH	ELBOURNE		215 809-	4900	
		Name of I	Person	Area Code	Daytime Telepho	ne Number
Enclosed	d is a	check for the	following amount:			
≡ \$25.	.00 Fi	lling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VENICE CARS, 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 April 7, 2021 and assigned Florida document number _____L21000162556 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida _

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
AR	JON R. FAHS, JR	227 Nokomis Avenue S	□ Add
		Venice, FL 34275	
			□ Change
			□ Add
			□Remove
			Change
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ctive date, if othe	er than the date of fil	June 16, 2021		(optional)	1
effective date is listed	, the date must be specific and in this block does no	and cannot be prior to da	e of filing or more th	an 90 days after filing) Purrought to 605
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meg.					
June 16		2021			
* 					
	77. Ll	a member or authorized			
	Signature of	a member or authorized	representative of a n	nember	77
ROBERT SI	HELBOURNE, as Man	ager of VENICE CAR	S. LLC		7,121 ::::
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