-31000519

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(· · · · · · · · · · · · · · · · · · ·
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City (Credy City ID)) (0)
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL
(Document Number) Certified Copies Certificates of Status	
Certified Copies Certificates of Status	(Business Entity Name)
Certified Copies Certificates of Status	
Certified Copies Certificates of Status	(Document Number)
	Certified Copies Certificates of Status
Special Instructions to Filing Officer:	Octanidates of Status
Special Instructions to Filing Officer:	
	Special Instructions to Filing Officer:
i	

Office Use Only



800372929948

09/09/21--01010--010 *+25.00

OCT 01 2021

D CUSHING

REQUIVED

24월 AUG 19 AH 10: 29

٠:,

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2021

ELYSEE SAINT FLEUR MIAMI CAR MASTER'S 20038 NE 2ND CT MIAMI, FL 33179

SUBJECT: MIAMI CAR MASTER'S LLC

Ref. Number: L21000279821

We have received your document for MIAMI CAR MASTER'S LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$25.00.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 921A00018233

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Miami Car Master's		
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our recor imited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Con	mpany were filed on <u>06/16/2021</u>	and assigned
Florida document number 1.21000279821	<u>-</u> .	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
he new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC	
Enter new principal offices address, if applicable:		2021 SEC TA
Principal office address MUST BE A STREET ADDRE	<u></u>	SER SER
		Taxes
		Sign Br
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		00
		
3. If amending the registered agent and/or registered of gent and/or the new registered office address here:	office address on our records, <u>enter</u>	the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre:	SS
		orida
	City	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 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
			□Add
			□Remove
			Change
			□Add
			□ Remove
			□Change
			□Remove
			□Change
			□Remove
			□ Change
		-	
			□Remove
			□Change
			□Abd
			□ Remove
			□Change

	The secretary name should be: Sennedie Caceus Saint Fleur instead of Sennedie Saint Fleur.
fect	ive date, if other than the date of filing:(optional)
an ef	fective 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
ote:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	and a second of the population of place a records.
****	ad amorifica a delicuid official decides to the second of
is fi	d 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 led.
ated	09/16
aten	$\frac{00/10}{100}$
	Unila ()
	Signature of a member of Authorized representative of a member
	or personality of a memori
	ELVISEE SAINT FLEUR