L21000359097

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SECRETARY OF STATE NAME OF STATE OF STA

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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: PRS	Auto Broker LLC			
SUBJECT.		ited Liability Company	····	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	<u> </u>	sem khuhaifeh		
		Name of Person		
		Firm/Company		
	11865 Sh		Suite (34-4	
		Address		
	Miami	FL 33175 City/State and Zip Code		
		City/State and Zin Code		
	E-mail address: (o broker agmail. (Or	notification)	
For further information co	neerning this matter, please ca	all:		
112	1, 191		25.7	
Wui 50m	Person	at (<u>786</u>) <u>643</u>	-3 / 55 vtime Telephone Number	
rune or	i Cistili	/ Note Code Du	yane releptone ramoer	
Enclosed is a check for the	e following amount:			
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ S60.00 Filing Fee,	
C	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy	
		(additional copy is chelosed)	(additional copy is enclosed)	
Mailing Address	•	Street Address	S <u>:</u>	
Registration Section		-	Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

FILED

2021 AUG 26 AH 4: 26 Company as it now appears on our records. J. HASS Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number L21000354097 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 registeragent and/or the new registered office address here: whisem khu hiteh 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.

Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being a or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MAR	Wuisen Khucheufeh	11865 SW 26th Street Suite (34-4 Miami FL, 33	
		Suite (34-4 Miami FL, 33	775 Remove
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	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e	tive date, if other than the date of filing:
he reco	ord 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 filed.
Dated	1 August 19 2021
	Signature of a member of authorized representative of a member
	We what fall

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