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23 JUL -5 PH 3: 5:

COVER LETTER

	Registration So Division of Co					
end nez		OTORS, LLC	>			
SUBJEC	.1:		ited Liability Company			
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		FIORELLA MANNAREL	LI			
		_	Name of Person	· 		
			Firm/Company			
		E				
			Address			
		MIAMI, FL 33186				
		 .	City/State and Zip Code			
		FMANNARE@GMAIL.CO		1.4		
12 4 4				itification)		
For furth	er information (concerning this matter, please c	an:			
FIORELLA MANNARELLI		954 251-7325 at ()				
,	Name o	of Person	Area Code Dayti	me Telephone Number		
Enclosed	l is a check for t	he following amount:				
= \$25.9	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 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		Street Address: Registration Section				
	Division of C		~			
	P.O. Box 632			Code 251-7325 Daytime Telephone Number		
	Tallahassee.	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

23 JUL -5 PH 3: 52

FIRST MOTORS, LLC

(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{03/14/2022}{}$ and assigned 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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>	<u>Address</u>	Type of Action
AMBR	ANTONIO R. BATTI BRITTO, JR	TOMASAL 753	□Add
		CASA B	≣Remove
		LIMA, PERU 15023	
AMBR	ANTONINO R. BATTI BRITTO, J	TOMASAL 753	≣Add
		CASA B	
		LIMA, PERU 15023	□Change
MGR	MARK BATTI	9422 SW 127TH AVENUE	= Add
		MIAMI, FL 33186	□Remove
			□Change
			□Add
			□Remove
		 	Change
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