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SECRETARY OF STATE CORPORATIONS

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division	of Corp	orations			
	nack Aut	o LLC			
SUBJECT:		Name of Lim	ited Liability Company		_
The enclosed Arti	icles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all c	orrespon	dence concerning this matter	to the following:		
		Michael Dempsey			
			Name of Person		_
		ZenBusiness Inc.			
		<u> </u>	Firm/Company		_
		5511 Parkerest Drive Suite	103		
			Address		
		Austin, Texas, 78731			
			City/State and Zip Code	· - · · · · · · · · · · · · · · · · · ·	- -
		fulfillment@zenbusiness.co			
		E-mail address: (t	o be used for future annual re	port notification)	-
For further inform	nation cor	ncerning this matter, please co	ill:		
Michael Dempsey	y c/o Zen	Business Inc.	844 493- at ()	6249	
	Name of	Person	Area Code	Daytime Telephone Num	ber
Enclosed is a chec	ek for the	following amount:			
■ \$25.00 Filing	Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certifi sed) Certifi	Filing Fee, icate of Status & led Copy nal copy is enclosed)
Registr	Address: ation Se	ection		ion Section	
	n of Co ox 6327	rporations		of Corporations re of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Schnack Auto LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited l	ny as it now appears on o Liability Company)	ur records.)
The Articles of Organization for this Limited L. Plorida document number 1.22000165188	iability Company	were filed on 2022-04	and assigned
his amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
he new name must be distinguishable and contain the		lity Company," the designate	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STREI	<u>(TADDRESS)</u>		
inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		8443 Cocoa Avenue	
		Jacksonville, FL 3221	1-7926
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our record	s, enter the name of the new register
Name of New Registered Agent:	-		
New Registered Office Address:	8443 Cocoa Av		
		Enter Florida str	eet address
	Jacksonville		Florida 32211-7926 Zip Code
		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>	<u>Address</u>	Type of Action
MGR	Brandon Schnackenberg	8443 Cocoa Avenue	
		Jacksonville, FL 32211-7926	□Remove
		-	□Add
			□Remove
			□Change
	·····		□Add
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			☐ Change
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	 		□Add
			Remove
			□Change

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	ated April 25	. 2022	<u></u> .		
Signature of a member or authorized representative of a member					
	/s/ Brandon Sch	inackenberg			

Filing Fee: \$25.00