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	(Requestor's Name)	
	(Address)	
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	(Address)	
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-	(City/State/Zip/Phone #)	
<u></u>		
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
·	(Oddinood Enitty Hamo)	
•	(Document Number)	
Certified Copies	_ Certificates of S	Status
	Filing Officers	
Special Instructions to	Filing Officer:	
	J. HORNE	
	SEP 2 0 2022	
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COVER LETTER

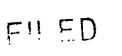
Division of Cor			
SUBJECT:			
	Name of Lim	ited Liability Company	
T)		in the cr	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	AMno	NY AMOYO	
		Name of Person	
		Firm/Company	
	2741	SAKBroot Munur	
		Address	
		WeStON FL 33332 City/State and Zip Code	
	E-mail address:	1+hony@ymail.co	<u>m</u>
For further information c	oncerning this matter, please c	all:	
		at (305) 219 ()Q2	2
Name o	f Person	Area Code Daytime Telephone	Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) C	50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
New York and the	-	C	
<u>Mailing Addres</u> Registration S		Street Address: Registration Section	
Division of C	orporations	Division of Corporations	
P.O. Box 632	7	The Centre of Tallahasse	e

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



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בר או באו ויי אר

		2022 SEP 20 PH 4- 24
ORLANDO LUXURY MOTORS	LLC	SECRETARY OF 5
(Name of the Limited Liability C (A Florida Lin	ompany as it now apper	ars on our records. N. 1. 353.
(itt ionaa Ein	inica Emonity Company)	
The Articles of Organization for this Limited Liability Com	• • —	5 - 20 - 2027 and assigned
Florida document number <u>L2200023 67-57</u>		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	liability company l	ere:
The new name must be distinguishable and contain the words "Limited	Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
-		-
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	<u>S)</u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of	fice address on our	records, <u>enter</u> th <u>e name of the new registere</u>
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flo	orida street address
		, Florida
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = 'Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Alexsis J. Arroy	3340 SW 92 Avenus	Note = 1
		MIGMI, FL 3316	5 Kremove
			□Change
<u>MG</u> K	RIDA MAZEEM		□Add
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			Remove

an effective of the state of th	ate, if other than the date of filing: 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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
record spec Lis filed,	rifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
. 10 11160.	9 19 1
ated	1-19- day.
_	Signature of a member or authorized representative of a member
	Anthony Arroyo

Filing Fee: \$25.00