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(F	Requestor's Name)		
(/	Address)		
(<i>F</i>	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(8	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
	Q. SILAS		
	n h 2022		





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ECRETARY OF STATE

COVER LETTER

Registration Section

TO:

Division of Cor	porations		
SUBJECT:	Caelos Aut	o Sales LCC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	·	-	
Please return all correspo	indence concerning this matter	-	
	Christie	Name of Person Stantown 01. Firm/Company	
	(0784 B	brentlawn oi.	
		Firm/Company	
	-	Address	
	Spany H	City/State and Zip Code	
		City/State and Zif/ Code	
	E-mail address; (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration Se	ection
Division of C		Division of Co.	
P.O. Box 632	7	The Centre of	-
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ceelos Auto		COLLANGES PARISON
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears la Limited Liability Company)	SECRETARY OF STATE TALLAHASSEE, FL
The Articles of Organization for this Limited Liability C	Company were filed on	6/14/2627 and assigned
Florida document number <u>L220027 (23</u>		, .
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company her	<u>e</u> :
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the de-	signation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our re	cords, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Floric	la 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 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>	Name	Address	Type of Action
MER	Ciaralyn A. Medina	10286 Breatlewa ST.	□Add
		Sparythil, EL 34608	□Remove
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
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			□Change

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Effective date, if other than the date of filing:	605 0207 (3V
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a rd is filed.	fter the
Dated	
Signature of a member or authorized representative of a member	
Christie i. Macling - Soto.	

Typed or printed name of signee