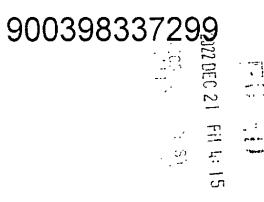
22000333616

	(Requestor's Name)	-
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAJL MAJL
	(Business Entity Name)	
	(Document Number)	-
Cemfied Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
		

Office Use Only





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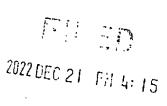
COVER LETTER

TO:	Registration Sect Division of Corpo				
SUBJE	AutoBizBrok	ers, LLC			
SUDJE		Name of Lim	ited Liability Company		-
		mendment and fee(s) are sub-	-		
		Sandra Krause			
			Name of Person		_
		AutoBizBrokers, LLC			
			Firm/Company		
		141 Grandmar Chase			
			Address		_
		Canton, GA 30115			
		Sandra@AutoBizBrokers.co	City/State and Zip Code		
			to be used for future annual :	eport notification)	-
For fur	ther information cor	ncerning this matter, please co	ail:		
Sandra	Krause		770 88	5-3715	
	Name of I	Person	at ()	Daytime Telephone Numb	oer
Enclose	ed is a check for the	following amount:			
≅ S 2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is each	Certifi (sed) Certifi	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
	Mailing Address:	i ,	Street Ac	ldress:	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



AutoBizBrokers, LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Co. Florida document number 1.22000333616	ompany were filed on July 28, 2022	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company here:			
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	ESS)			
	 			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>enter th</u>	e name of the new registered		
Name of New Registered Agent:				
New Registered Office Address:				
TOW AMERICAN VILLEN FRANCE.	Enter Florida street address			
	, Flori	, Florida		
	•	Zip Code		
New Registered Agent's Signature, if changing Registered	d Agent:			
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confidence accept the obligations of my position as registered ageing filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of my duties, and gent as provided for in Chapter 605, F.S	I am familiar with and S. Or, if this document is		

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>	Name	Address	Type of Action
MGR	Scott Krause	141 Grandmar Chase	
		Canton, GA 30115	■Remove
			
			CI Remove
			DAdd
			П Remove
			□Change
			□ Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change

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fective date, if other	r than the date of fili the date must be specific a	ng:	1	(optional)
ote: If the date inserted	ed in this block does not	t meet the applicable	e statutory filing rec	uirements, this dat	g.) Pursuant to 605.020 e will not be listed a
ocument's effective date	te on the Department of	State's records.			
record specifies a delay- is filed.	ed effective date, but no	ot an effective time	, at 12:01 a.m. on th	e earlier of: (b) T	he 90th day after the
	\cap	2022			
December 20		-:	•		
ated December 20	- 1/ i.	/			
December 20	Janky K	Trause			
ated December 20	Signature of	a member or authoriza	ed representative of a	member	

Filing Fee: \$25.00