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COVER LETTER

Section orporations		
OS LLC		
Name of Lim	ited Liability Company	
of Amendment and fee(s) are sub	mitted for filing.	
pondence concerning this matter	to the following:	
JAIME GARCES		
	Name of Person	
GD AUTOS LLC		
	Firm/Company	
37812 HWY 54		
	Address	····
ZEPHYRHILLS FL 3354	1	
	City/State and Zip Code	
		1
		meaton)
concerning this matter, please c		
	at ()	
e of Person	Area Code Daytin	ne Telephone Number
the following amount:		
☐ \$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)
	<u>Street Address:</u> Registration Se	ection
Corporations	Division of Corporations	
		Tallahassee oc Street, Suite 810
	OS LLC Name of Lim of Amendment and fee(s) are subspondence concerning this matter JAIME GARCES GD AUTOS LLC 37812 HWY 54 ZEPHYRHILLS FL 3354 GDAUTOSLLC@OUTLO E-mail address: 6 a concerning this matter, please concerning this matter, please concerning this matter.	Name of Limited Liability Company of Amendment and fee(s) are submitted for filing. pondence concerning this matter to the following: JAIME GARCES Name of Person GD AUTOS LLC Firm/Company 37812 HWY 54 Address ZEPHYRHILLS FL 33541 City/State and Zip Code GDAUTOSLLC@OUTLOOK.COM E-mail address: (to be used for future annual report not a concerning this matter, please call: at (

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GD AUTOS LLC

221. 1-2 TIG: 0

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{07/28/2022}{}$ ____ and assigned Florida document number L22000334317 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 "L.L.C." Enter new principal offices address, if applicable: ZEPHYRIIILLS FL 33541 (Principal office address MUST BE A STREET ADDRESS) 37802 HWY 54 Enter new mailing address, if applicable: ZEPHYRHILLS FL 33541 (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

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.

City

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>	Address	Type of Action
MGR JAIME GARCES	37802 HWY 54	□Add	
		ZEPHYRHILLS FL 33541	□Remove
		□Add	
		Removç	
		□Change	
		□ Add	
		□Remove	
		□Change	
		□Add	
		□Remove	
		□Change	
		□Add	
		□Remove	
		Change	
			□Remove
			□Change

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•	
(If an el	ive date, if other than the date of filing:
he reco ord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	Nov 2, 202
	Signature of a member or authorized representative of a member
	Typed or printed name of signee