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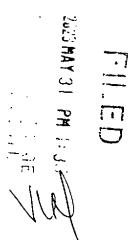
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COVER LETTER

	Registration Se Division of Cor		er Ge	.6
CHRIC	VENDOZE	LLC NAME CHANGE	 .	
SUBJEC	1:	Name of Limi	ted Liability Company	
The enclo	sed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please ret	um all correspo	ndence concerning this matter	to the following:	
		NAZIA ANDALEEB KHA	AN	
			Name of Person	····
		VENDOZE LLC		
			Firm/Company	···
		6236 N RI CHMOND STRI	EET	
			Address	
		CHICAGO, ILLINOIS, 60	659	
			City/State and Zip Code	
		quartal consultants@ hotma E-mail address: (in.com to be used for future annual report not	ification)
For furthe	er information c	oncerning this matter, please ca	all:	
NAZIA A	ANDALEEBKI	HAN	872 9854307	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
₩ \$25.0	00 Filing Fee	□ \$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)
	Mailing Addres Registration S		<u>Street Address:</u> Registration Sc	ection
	Division of C		Division of Co	
	P.O. Box 632		The Centre of	Fallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VENDOZE LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company		and assigned
Florida document number L22000352936		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
CAR PARTSPLUSILC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		·· <u>E</u>
		€3
		AY
Enter new mailing address, if applicable:		<u>. ω ;—</u>
(Mailing address MAY BE A POST OFFICE BOX)		3 1
(mulang data ess size in Exp (5) Of FICE BOX		
	-	
B. If amending the registered agent and/or registered office	address on our records, enter th	e name of the new registered
agent and/or the new registered office address here:	address with the transfer to	ie manie vi inc new regimeree
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ida
	Cuy	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.

Kamending 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
			□Add
			□Remove
			□Change
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ffective date, if other than the can effective date is listed, the date must note: If the date inserted in this bloocument's effective date on the De	be specific and cannot be prick does not meet the app	ior to date of filing or licable statutory fil	more than 90 days after i	iling.) Pursuant to 605,0207
record specifies a delayed effective d is filed.	date, but not an effective	time, at 12:01 a.n	a, on the earlier of: (b)	The 90th day after the
Dated	. 2023	·		
	A (1)	,		
	Signature of a member or a	<u> </u>		

Filing Fee: \$25.00