| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | #) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nam | e) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: Registration Division of C | Section Corporations | |
|--------------------------------|---|--|
| | OTORS LLC | |
| SUBJECT: | ited Liability Company | |
| The enclosed Articles | of Amendment and fee(s) are sub- | mitted for filing. |
| Please return all corre | spondence concerning this matter t | to the following: |
| | ERMAND KUQO | |
| | Name of Person | |
| | | |
| | Firm/Company | |
| | | |
| | Address | |
| | 07-5164 | |
| | ermandkuqo33@gmail.com | City/State and Zip Code |
| | | to be used for future annual report notification) |
| For further informatic | n concerning this matter, please ca | ıll: |
| ERMAND KUQO | | 904 4001786 at () |
| Nan | ne of Person | Area Code Daytime Telephone Number |
| Enclosed is a check for | or the following amount: | |
| ■ \$25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | Street Address: |
| P.O. Box 6 | on Section f Corporations | 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

| ERBI MOTORS LLC | | |
|--|---|--|
| (<u>Name of the Limited Liability Compan</u> (A Florida Limited Li | v as it now appears on our records.) ability Company) | |
| The Articles of Organization for this Limited Liability Company v Florida document number $\frac{\text{L}22000454267}{\text{L}}$. | were filed on 10/21/2022 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabil | itv company here: | |
| The new name must be distinguishable and contain the words "Limited Liabilit | y Company," the designation "LLC" or th | ne abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| B. If amending the registered agent and/or registered office acagent and/or the new registered office address here: Name of New Registered Agent: | ddress on our records, enter the i | name of the new registered |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florida | |
| New Registered Agent's Signature, if changing Registered Agent: | City | SECRETAR TARE |
| I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as pabeing filed to merely reflect a change in the registered office a company has been notified in writing of this change. | verformance of my duties, and 1 c rovided for in Chapter 605, F.S. | เกริสิทีที่เกียวงานหลักส Oraif-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> | <u>Name</u> | Address | Type of Action |
|--------------|-------------|--------------------------------|----------------|
| VP | ANILA MOLLA | 8649 A C Skinner Pkwy, Apt 121 | |
| | | JACKSONVILLE, FL 32256-7491 | ■Remove |
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| If amending any other informa | ttion, enter c | enange(s) ne | r e ; (Anach a | iaaiiionai snee | as, y necest | sary.) | | |
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| Effective date, if other than the lift an effective date is listed, the date mu Note: If the date inserted in this bedocument's effective date on the E | ist be specific an lock does not | nd cannot be price meet the appli | or to date of filir cable statutor | ng or more than 9 y filing require | (option 0 days after fi ments, this c | ling.) Pursua | unt to 60: of be list | 5,0207 ted as t |
| e record specifies a delayed effection | ve date, but no | nt an effective | time, at 12:01 | a.m. on the ea | rlier of: (b) | The 90th | day afte | er the |
| MARCH 26 | | 2024 | · | | | SECRE TALL | 2024 APR -5 | آلت |
| | | | | | | AHA | ž. | 17 mar. |
| | Signature of a | member or aut | horized represe | ntative of a men | ber | 3SE | | |
| ERMAND KUQO | | | | | | STA | :01 Hid | () () () |

Typed or printed name of signee