## L22000526968

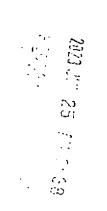
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TO:	Registration Se Division of Cor		• 4		•		
		OR SALES LLC					
SUBJEC	LI:	Name of Limited Liability Company					
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn ali correspo	ndence concerning this matter	to the following:				
		David Winters					
			Name of Person				
		The Revenue Place Inc					
			Firm/Company		<del></del>		
		1208 US 1 North, Suite F					
			Address				
		North Palm Beach, FL 334	408			,	
			City/State and Zip Code			<u>:</u>	تت .
		dave@therevenueplace.com		_	<u> </u>	: · . <del>-</del>	
		E-mail address: (	to be used for future annual	report notification	)		Ω; 
For furth	her information c	oncerning this matter, please c	all:				
David V	Winter		904 34' at ( )	7-1707		•	(A)
	Name o	f Person	Area Code	Daytime Telep	hone Number	; ;	ထိ
Enclose	d is a check for th	he following amount:					
<b>≘ \$</b> 25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee of Certified Copy (additional copy is end		\$60.00 Filing Certificate of Certified Co (additional cop	f Stat	tus &
	Mailing Addres		Street A				
	Registration S Division of C			ation Section n of Corporat	ions		
	P.O. Box 632		The Ce	ntre of Tallah	assee		
	Tallahassee,	FL 32314	2415 N	. Monroe Stre	et, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOP MOTORS AUTO SALES I.I		
(Name of the Lim	ted Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.
The Articles of Organization for this Limited I	iability Company were filed on 12	/08/2022 and assigned
Florida document number L22000526968	<del></del> ·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company h	ere:
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	lesignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	<u> </u>
		?
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u></u>	
	<del></del>	
B. If amending the registered agent and/or agent and/or the new registered office address.	•	ecords, enter the name of the new regis
Name of New Registered Agent:	The Revenue Place Inc	
New Registered Office Address:	5500 Tamberlane Circle #106	
	Enter Flo.	rida street address
	Palm Beach Gardens	, Florida

## 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 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	Eloy G. Guillen Ramos		_ 🗆 Add
			□ Remove
		62 KINGS WAY ROYAL PALM BEACH, FL 3341	1 ≣Change
			□ Add
			🗆 Remove
			_
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ective date, if other than the date of filing:effective date is listed, the date must be specific and cannot be pr	(optional) rior to date of filing or more than 90 days after filing.) Pursuant to 605.
ie: If the date inserted in this block does not meet the appument's effective date on the Department of State's record	plicable statutory filing requirements, this date will not be listereds.
	re time, at 12:01 a.m. on the earlier of: (b) The 90th day after
s filed.	
07/13/2023	
ed	<del></del> ·
AAR WHOTES.	uthorized representative of a member

Filing Fee: \$25.00