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(((H23000053425 3)))



H230000534253ABCY

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : 2D CONSULTING ENTERPRISE LLC

Account Number : 120220000099 Phone : (904)382-0889 Fax Number : (321)296-7174

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **SM1 AUTO SALES LLC**

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COVER LETTER

TO: Registration Division of C			
	TO SALES LLC		
SCHOLCT:	Name of Lin	nited Liability Company	···
The proloced Articles	of Amendment and fac(s) are sub-	mitted for Elina	
	of Amendment and fee(s) are sub	-	
Please return all corres	pondence concerning this matter	to the following:	
	FLOR LOZANO DUGGE	TR.	
		Name of Person	
	2D CONSULTING ENTE	RPRISE LLC	
		Firm/Company	
	241 HAMMOCK AOK C	RCLE	
		Address	
	DEBARY, FLORIDA 327	13	
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	2DCONSULTINGENTER		
	E-nuil address: (to be used for future annual report notific	cation)
For further information	concerning this matter, please c	ali:	
FLOR LOZANO DUC	GER	904 382-0889	
Name	e of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr		Street Address:	ian
Registration Division of	Section Corporations	Registration Sect Division of Corp	
P.O. Box 63	•	The Centre of Ta	llahassee
Tallahassee	FI 32314	2415 N. Monroe	Street Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SMI AUTO SALES LLC					
(Name of the Limited Linh) (A Flori	ollity Company ada Limited Liab	as it now appears)	ars on our reco	rds.)	
The Articles of Organization for this Limited Liability Florida document number <u>L23000041063</u>	Company we	ere filed on $\frac{0}{2}$	1/23/2023		_ and assigned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	mited liabilit	y company h	<u>nere</u> :		
The new name must be distinguishable and contain the words "Li	imited Liability	Company," the	designation "LL	.C" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	-				
(Principal office address MUST BE A STREET ADD	DRESS)				<u> </u>
	-				
Enter new mailing address, if applicable:	_			4	
(Mailing address MAY BE A POST OFFICE BOX)	-			₹ 2	753
			···		<u></u>
B. If amending the registered agent and/or registerence agent and/or the new registered office address here:		iress on our	records. <u>ente</u>	r the name o	I the new registere
agent and of the new registered office address here.	•				PH 2
Name of New Registered Agent:					J. U.
			.,		•
New Registered Office Address:	· ,,	Enter Flo	rido street addre	288	
			, F	lorida	Zip Code
		City			Zip Code
New Registered Agent's Signature, if changing Register	red Agent:				
I hereby accept the appointment as registered agen- provisions of all statutes relative to the proper and accept the obligations of my position as registered of being filed to merely reflect a change in the register company has been notified in writing of this change	complete pe agent as pro red office aa	rformance o vided for in	f my duties, o Chapter 605,	and I am fan F.S. Or, if i	uliar with and his 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
Manager	FRANCISCO MANSO	18580 E COLONIAL DR 505	
		ORLANDO, FL 32820	
			□ Change
			□Add
			Петюvе
			□Clumge
			□ Add
			□Remove
			— □ Change
			Cladd
			□Remove
			□Clyange
			□Add
			□Remove
			Change
			🗀 Add
			©Remove
			□Change

·		
		
		
		
		
Effective date, if other than the If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	ock does not incet the applicable statutory	(optional) g or more than 90 days after filing.) Pursuant to 605 02 filing requirements, this date will not be listed
e record specifies a delayed effective and is filed.	edate, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
Dated Febreruary 01	. 2023	
	Francisco Manso	
	i winder inunto	
	Signature of a member or authorized represen	talive of a member

Filing Fee: \$25.00