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COVER LETTER

TO: Registration Se Division of Cor			•	
VISION CA		•		
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	IRIS M BRICENO			
		Name of Person		
	VISION CARS LLC			
		Firm/Company		
	5252 NW 85TH AVE AP	Г 1107		
		Address	· · · · · · · · · · · · · · · · · · ·	
	DORAL, FL 33166			
		City/State and Zip Code		
	USTUEMPRESA@GMAI			
For further information of	h-mail address; (concerning this matter, please c	to be used for future annual report no all:	tification)	
IRIS M BRICENO		786 340-0372		
Name o	of Person	at () Area Code Daytii	me Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)	
Mailing Address		Street Address:	oction	
Registration Division of C		_	Registration Section Division of Corporations	
P.O. Box 632	27	The Centre of	The Centre of Tallahassee	
Tallahassee.	FL 32314	2415 N. Monr	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 JUL 17 At 7:31 VISION CARS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) ALLTHA SEET The Articles of Organization for this Limited Liability Company were filed on $\frac{03/17/2023}{1}$ and assigned Florida document number 1.23000137466 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NA The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." NA 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 address on our records, enter the name of the new register agent and/or the new registered office address here: NA Name of New Registered Agent: NA. New Registered Office Address: Enter Florida street address , Florida NA
Zip Code NA

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 to 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	IRIS M BRICENO	5252 NW 85TH AVE APT 1107	
		DORAL, FL 33166	■Remove
			□Change
AMBR LUIS M	LUIS MIGUEL GONZALEZ	5252 NW 85TH AVE APT 1107	≅ Add
		DORAL, FL 33166	□Remove
AMBR	LUIS FELIPE GONZALEZ	5252 NW 85TH AVE APT 1107	■Add
		DORAL, FL 33166	□Remove
			□Change
NA NA	NA	□Add	
			□Remove
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NA	NA	NA	□Add
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Effective date, if other than the fan effective date is listed, the date m	e date of filing:	erta data of filing or mura	(optional)	
Note: If the date inserted in this b	lock does not meet the appli	cable statutory filing re	equirements, this date will not	be listed as:
document's effective date on the I	Department of State's records	S.		
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e record specifies a delayed effecti ed is filed.	ve date, but not an effective	nme, at 12:01 a.m. on i	the earlier of: (b) The 90th di	ay after the
Dated	. 2023	·		
Dated		·		
Dated		1 Briceno	a member	 -
Dated		1 Briceno horized representative of	a member	

Filing Fee: \$25.00