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(Requestor's Name)
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TO: Registration Section

Division of Corporations				
411 TEN TEN CUE	D GAREAUD USED PRODU	CTS LLC		
SUBJECT:	Name of Lin	nited Liability Company		
The applicant Artistan of	Amendment and fee(s) are sub	anitted for filing		
Please return all correspo	ondence concerning this matter	to the following:		
	LAFONTAINE GAREAU	Э		
		Name of Person		
		Firm Company		
	7319 BRIARLYN CT			
		Address		
	ORLANDO, FL 32818			
		City/State and Zip Code		
	lafontainegareaud321@gms	ail.com to be used for fature annual report no	titioati mi	
For further information c	oncerning this matter, please c		(incansii)	
LAFONTAINE GAREAUD		407 7938433		
Name o	f Person	at () Area Code Daytii	me Telephone Number	
Enclosed is a check for the	ne 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 (additional copy is enclosed)	
Mailing Addres		Street Address:	vetion	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 632	.7	The Centre of	Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LINDA AND GAREAUD USED PRODUCTS LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	nny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.23000226014	were filed on 05 08/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LEC" or the abbreviation "L.E.C."
Enter new principal offices address, if applicable:	7319 BRIARLYN CT, ORLANDO, FL 32818
Principal office address MUST BE A STREET ADDRESS)	2
Enter new mailing address, if applicable:	7319 BRIARLYN CT, ORLANDO, FL 32818
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the new regist</u>
New Registered Office Address:	Enter Florida street address
	Florida
	City 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 tiled 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>	Name	Address	Type of Action
			DAdd
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		,	□Add
			□Remove
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			□Change
			☐Remove
			□Change

Lai	n removing MGR from Lynda Janvier and Lafontaine Garcaud under nathorized persons.	
CH	ANGE LYNDA JANVIER, MGR TO " LYNDA JANVIER"	
CH	ANGE LAFONTAINE GAREAUD, MGR TO "LAFONTAINE GAREAUD"	
-		
,		
rffect <u>:</u> H	date, if other than the date of filing:	
ord s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after .	the
d _/	August 26 . 2024.	
6	Signature of a member or authorized representative of a member	
	La Fontaine Gareaud	