L23000226430

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COVER LETTER

Registration Section

TO:

Div	ision of Cor	porations				
eun mér.	LUXSIDE MOTORS LLC					
SUBJECT:	Name of Limited Liability Company					
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Andrea Hollingsworth				
			Name of Person			
		Viglione Accounting Corp				
			Firm/Company			
		7061 S Tamiami Trl suite	04			
			Address			
		Sarasota, FL 34231				
			City/State and Zip Code			
		aviglione@mc.com	to be used for future annual report notific	antian)		
For further i	nformation c	oncerning this matter, please c		ation		
Andrea Holi	lingsworth		941 465-7867 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is:	a check for th	ne following amount:				
■ \$25.00 i	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	ailing Addres		Street Address: Registration Sect	ion		
Division of Corporations			Division of Corporations			

The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUXSIDE MOTORS LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records Liability Company)	<u>.</u>)	
The Articles of Organization for this Limited Liability Company Florida document number L23000226430	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	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	5862 Deacon Rd	~)	
Principal office address MUST BE A STREET ADDRESS)	Sarasota, FL 34238	123	
		72	
Enter new mailing address, if applicable:	5862 Deacon Rd	7	
Mailing address MAY BE A POST OFFICE BOX)	Sarasota, FL 34238	က္	
maning data ess may be a rost of rice body	-	22	
 If amending the registered agent and/or registered office agent and/or the new registered office address here: 	address on our records, <u>enter t</u>	he name of the new regist	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Floo		
	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 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>	<u>Address</u>	Type of Action
MGR	Maria G Marquez	Maria G Marquez	≣ Add
		6150 Tumbury Park Apt 3104	□D
		Sarasota, FL 34243	□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
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Signature of a member or authorized representative of a member	1 pat	Hermuder		
	True	Signature of a member or authorize	d representative of a member	.
	Hector S Bermudez	Rodriguez		

Typed or printed name of signee