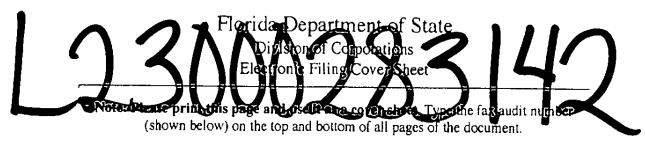
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Division of Corporations

HZ400025505ZZ



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : DEALER CONSULTING SERVICES, INC.

Account Number : I20010000121

Phone

: (305)758~9001 Fax Number : (786)410-6035

**Enter the email address for this business entity to be used for future

≒tannual report mailings. Enter only one email address please.**

CORPORATIONS@DCS-NETWORK.COM 'Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GARE SERVICES LLC

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M. SOLOMON

JUL 29 2024

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CUVER LETTER

H240002530525

TO: Registration S Division of Co					
	RVICES LLC				
SUBJECT:	Name of Lis	nited Liability Company			
	Amendment and fec(s) are su	-			
	ALEXANDRA BAUTIS	ГА			
		Name of Person			
	DEALER CONSULTING	SERVICES, INC			
		Firm/Company			
	7537 NW 7TH AVE			20 28	
		Address		2024 J	
	MIAMI, FL 33150			JUL 29 GRETARY AHASSE	
		City/State and Zip Code		· · · · ·	L
	CORPORATIONS@DCS-		···	PR SFE	
For further information of	E-mail address: concerning this matter, please c	to be used for future annual report all:	notification)	1: 45 STATE LOSIOJ	
ALEXANDRA BAUTIS	STA	305 758-900	1		
Name o	f Person	Area Code Da	ytime Telephone Number	_	
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Sectificate of Sectificate Copy (additional copy in	Status & Y	
Mailing Addres	<u>!:</u>	Street Address	i.		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Docusign Envelope ID: EZCF2833-6998-438E-9E87-99A5BA7886C3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HZ 400025505ZB

GARE SERVICES LLC				
(Name of the Limit	ed Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)		
The Articles of Organization for this Limited Li	ability Company w	ere filed on 06/12/2023	and assigned	
Florida document number L23000283142	<u></u> .			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liabili	ty company here:		
The new name must be distinguishable and contain the w	ords "Limited Liability	Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applica	able:		2024 1 A C T	
(Principal office address MUST BE A STREE	TADDRESS)			
			IASS	
	•		<u> </u>	•
Fator commelliar address if a climb			- 19 - 19 - 19 - 19 - 19 - 19 - 19 - 19 - 19	
Enter new mailing address, if applicable:	•		S	
(Mailing address MAY BE A POST OFFICE I	<u>30X)</u>			
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office ado s here:	dress on our records, <u>enter the</u>	name of the new registered	₫
Name of New Registered Agent:				
New Registered Office Address:	4312 BAYSIDE D	PR		
		Enter Florida street address		
	KISSIMEE	Florid	a 34746	
		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.

Oocustmed by:

Office of the Change of New Registered Agent

If Change of New Registered Agent

Docuston Envelope ID: E2CF2833-6998-438E-9E87-99A58A768BC3 II 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	Angel A. Garcia Zambrano	4312 BAYSIDE DR	∃ Add
		KISSIMEE , FL, 34746	□Remove
			□Change
MGR	Yamii H. Delgado Solano	4312 BAYSIDE DR	
		KISSIMEE, FL, 34746	□Remove
			Change 2
MGR	Edgar A. Diaz Meza	1100 ZION DR	
		HAINES CITY, FL 33844	Remove —
			DATE SALES
MGR	Kimberly C. Blanco Tovar	1100 ZION DR	⊟Add
		HAINES CTTY, FL 33844	□Remove
			□Change
MGR	GARCIA, ANGEL A	6155 NW 105TH CT APT 4128	
		DORAL, FL 33178	■Remove
			Change
			□Add
			□Remove
			□Change

From: +17864106035 (DCS)

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		· · · · · · · · · · · · · · · · · · ·
		SECRETARY FALLAHASS
		IAR) ASS
		
		ORIGI
		
ote: If the date is listed, the date in this incument's effective date on the	the date of filing: Let us be specific and cannot be prior to date of filing or more than block does not meet the applicable statutory filing requipepartment of State's records. Let us be a statutory filing requipepartment of State's records.	n 90 days after filing.) Pursuant to 605.0207 (3 frements, this date will not be listed as the
is filed.	,	
July 25th	2024	
(0.2	2024 gened by:	