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COVER LETTER

	legistration Se Division of Cor				
CUD IEZT		UTO CENTER, LLC			
SUBJEC1	ı; <u>_</u>	Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub			
		Hussein Fares			
			Name of Person		
	EMPIRE AUTO CENTER, LLC				
		•	Firm [†] Company		
	1700 San Pablo Rd S, Apt 1103				
Address					
	Jacksonville, FL 32224				
		EmpireAutoCtr@gmail.cor	City/State and Zip Code	·	
			to be used for future annual report notif	ication)	
For further	r information co	oncerning this matter, please c	all:		1024 F
Mohamma	ad Fares		909 501-5501 at ()		EB I
	Name o	f Person	Area Code Daytime	Telephone Number	2024 FEB 13 AM 8: 4 SECTION 1. MESFA
Enclosed i	s a check for th	ne following amount:			E 8: 4
) Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate o Certified Co tadditional cop	of Status &
ð	lailing Addres	s:	Street Address:		

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EMPIRE AUTO CENTER, LLC			
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Compan	y)	
The Articles of Organization for this Limited I		07/27/2023	and assigned
Florida document number L23000353990	<u></u> ,		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company	here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," th	ne designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)	-	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u> </u>		·
			
			营车 四
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on ou	r records, <u>enter the nar</u>	né of the new register
agent and/or the new registered orace additi	ess nere.		ω
Name of New Registered Agent:	Motaz Abdallah		
New Registered Office Address:	1700 SAN PABLO ROAD SO	UTH, APT 1103	TO CO
	Enter i	Florida street address	m 6
	JACKSONVILLE	Florida <u>3</u>	2224
	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>	Address	Type of Action
MGR	Mohammad Fares	1700 San Pablo Rd S, Apt 1103	□Add
		Jacksonville, FL 32224	■Remove
			□Change
MGR	Hussein Fares	1700 San Pablo Rd S. Apt 1103	= Add
		Jacksonville, FL 32224	□Remove
			□Change
AMBR	Motaz Abdallah	1700 San Pablo Rd S. Apt 1103	≘ Add
		Jacksonville, FL 32224	□Remove Clarification Clar
			□ Change
			□Add
			□Remove
			Change
			
			□Remove
			□ Chunus

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. 2024 Signature of a member or authorized representative of a member Mohammad Fares Typed or printed name of signee