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COVER LETTER

	Registration Se Division of Cor					
SURIEC	DELUXE C	CARS USA ELC / DBA DELU	JXE CARS USA			
SCEFEC	1		ited Liability Company			
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please ret	urn all correspo	ndence concerning this matter	to the following:			
		ALEXANDER JOSE MO	NTILLA MACIASS			
			Name of Person			
		DELUXE CARS USA LL	C / DBA DELUXE CARS USA			
			Firm/Company			
		796 TURKEY POINT DR	. ORANGE PARK			
			Address			
		FLORIDA 32065				
			City/State and Zip Code	.		
		deluxecarsusa@gmail.com				
For furthe	er information c	E-mail address: (oncerning this matter, please e	to be used for future annual report no	outication)		
	r Montilla	oneering this matter, prease c				
Alexande			904 4286550 at ()			
	Name o	f Person	Area Code Dayti	me Telephone Number		
Enclosed	is a check for th	ne following amount:				
■ \$25.0	0 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)		
Mailing Address: Registration Section		Street Address: Registration S	ection			
	Division of C		Registration Section Division of Corporations			
	P.O. Box 632		The Centre of			
	Fallahassee, I	TL 02014	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	ТО	<i>20</i> 3 A
ARTICLES OF	ORGANIZATION	
	OF	
		Ph
DELUXE CARS USA LLC		
(Name of the Limited Liability Con (A Florida Limite	<u>праду as it now appears on ou</u> ed Liability Company)	r records.)
The Articles of Organization for this Limited Liability Compa	ny were filed on $\frac{10-31-23}{}$	and assigned
Florida document number L23000496553		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records	, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
	Z''.	, 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 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>	Name	<u>Address</u>	Type of Action
MGR	CARLOS GONZALEZ CANO	13425 SW 4TH TER	□ Add
		MIAMI, FLORIDA 33184	≣Remove
			□ Change
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	AS CERTIFIED		2024			
Signature of a member or authorized representative of a member	ed			, /	/	
Signature of a member or authorized representative of a member			1/4	2/2		