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COVER LETTER

Division of Corpo				
CARACAS	CARS LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.		
	dence concerning this matter	_		
	FRANCISCO COLMENA	ARES		
	·	Name of Person		
	FRANCISCO COLMENA	RES		
	-	Firm/Company		
	9750 PATTON RD,			
		Address		SE 202
	JACKSONVILLE, FL 322	246		CRE NO.
		City/State and Zip Code		THE RESERVE STATE
	E-mail address: (to be used for future annual report n	notification)	SER F 2
For further information cor	ocerning this matter, please c	all:		2
FRANCISCO COLMENA	RES	904 536-8340 at ()		, 123
Name of F	Person		time Telephone Number	
Enclosed is a check for the	following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
Mailing Address:		Street Address:	<u>.</u>	

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

CARACAS CA	ARS LLC	
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our record d Liability Company)	<u>r</u>)
The Articles of Organization for this Limited Liability Companies Florida document number L24000106066	ny were filed on 02/29/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
NA		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NA	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	SECRETARY 26
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent: NA		
New Registered Office Address:	Enter Florida street addres	s —
	ប ា.	orida
	City, File	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 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
	NA	NA	_ □Add
			_ □Remove
			_ Change
			_ 🗀 Add
			_ □Remove
			Change
			_ 🗆 Add
			_ Remove
			Remove SECRETARIASSEE SECRETARIASSEE
		ارا جو 	6 2 A A A
			P. D. Remove
			TIP 2
			_ □Add
			_ □Remove
			_ Change
			_ 🗆 Add
			_ □Remove
			_ Change

INFORMATION FOR M	Y COMPANY	CARACAS C	ARS LLC			_	
OLD PRINCIPAL ADDR	ESS: 1125 M	IIRAMAR AV.	JACKSONVII	LLE, FL 32207 U			
OLD MAILING, REGIST	TERED, AUT	HORIZED AN	D MGR ADD	RESS: 8814 EA	TON AV.,		
				JACKSON	NVILLE, F	L 32211	
NEW PRINCIPAL, MAIL	.ING, REGIS	STERED, AUTI	HORIZED AN	D MGR ADDRE	ESS:		
975	0 PATTON I	RD, JACKSON	VILLE, FLOR	IDA 32246.			
ective date, if other than to effective date is listed, the date ite: If the date inserted in this	nust be specific	and cannot be pri	or to date of filin			ing.) Purs	
cument's effective date on the ecord specifies a delayed effects is filed.	Department	of State's record	ds.				
AUGUST 20			<u></u> .				
		Dial					

. . .

Filing Fee: \$25.00