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Division of Corporations

Fax Number

: (850)617-6383

From:

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Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CW CAR RENEWAL LLC

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6/13/2024 12:25:55 PM PAGE 1/001 Fax Server



June 13, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

CW CAR RENEWAL LLC 3627 NW 106TH ST MIAMI, FL 33147US

SUBJECT: CW CAR RENEWAL LLC

REF: L24000204975

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

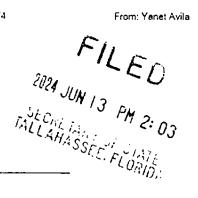
What are you wanting to do with Javier & Ollys?

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II FAX Aud. #: H24000205808 Letter Number: 324A00012884

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



CW Car Renewal LLC (Name of the Limited Liability Company as It now appears on our records.)

(A riorida Lin	nited Liability Company)		
The Articles of Organization for this Limited Liability Comp Florida document number L24000204975	pany were filed on 05/0	01/2024	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here	¥	
The new name must be distinguishable and contain the words "Limited	Liability Company," the desi	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	<u></u>		
	·		
•			
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			
_	····	 .	
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our rec	ords, <u>enter the nam</u>	e of the new registere
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	street address	
	, Florida		
	City		Zip Code
New Registered Agent's Signature, if changing Registered Ag	<u>rent:</u>		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacept the obligations of my position as registered agent	lete performance of m	y duties, and I am f	amiliar with and

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>	<u>Name</u>	Address	Type of Action
AMBR	Javier J Suarez Sanchez	14269 SW 166 St	bbA_
		Miami, FL 33177	Remove
			□Change
AMBR	Ollys Raquel Ruiz Leon	18430 SW 87 Ave.	⊠ Add
		Cutler Bay, FL 33157	
			Change
			DAdd
			Render To Render
	<u> </u>		DAdd P. 2: 03
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			□ Add
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			Remove
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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and cannot be clock does not meet the	applicable statutory	option (option) or more than 90 days after for filing requirements, this	iling.) Pursuant to 605.0207 (3)(
record specifies a delayed effect र्ष is filed.	ive date, but not an effec	ctive time, at 12:01	a.m. on the earlier of: (b)	The 90th day after the
Dated June 12	, 202	4		
				
Juan F Rito Hernandez (Jun 12, 20	Signature of a member of			