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Division of Corporations

lorida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

From: +17864106035 (DCS)

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 annual report mailings. Enter only one email address please.

Email Address:_

CORPORATIONS@DCS-NETWORK.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MCGILL GARAGE LLC

Certificate of Status 0 Certified Copy 0 Page Count 01 Estimated Charge \$25.00

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COVER LETTER

(+1240004177053)

TO: Registration Solivision of Co					
	GARAGE LLC		•		
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	DANIELA MONSALVE				
		Name of Person	 		
	DEALER CONSULTING	SERVICES, INC			
		Firm/Company			
	7537 NW 71'H AVE				
		Address			
	MIAMI, FLORIDA 33150	•			
		City/State and Zip Code			
	CORPORATIONS@DCS-I				
For further information of	e-mail address: (concerning this matter, please co	to be used for future annual report not all:	itication)		
DANIELA MONSALV	E	305 758-9001 at ()			
Name o	of Person		ne Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	S30.00 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		Street Address:			
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

From: +17864106035 (DCS)

(41240004177053)

MCGILL GARAGE LLC		
(Name of the Limited Liab) (A Flori	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 10/08/2024	and assigned
lorida document number L24000432144	<u></u> .	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
he new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "ELC" o	or the abbreviation "L.L.C."
enter new principal offices address, if applicable:	4949	······
Principal office address MUST BE A STREET ADD	RESS)	
		20
		F3)
nter new mailing address, if applicable:		· 🖰
Mailing address MAY BE A POST OFFICE BOX)		1(1)
nuang address MAY BE A FOST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
 If amending the registered agent and/or registeregent and/or the new registered office address here: 		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Liner (fortula su eet address	
	, Flor	ida Zip Code
	City	zip coue

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: (+1240004177053)

From: +17864106035 (DCS)

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	MAURO DOMINE	8427 NW 71H AVE	
		MIAMI, FL 33150	
			∃Cluange
AMBR	JUAN BAUTISTA GILL	8427 NW 71H AVE	☐Add
		MIAMI, FL 33150	□Remove
			■ Change
·			⊒Add
			□Remove
			□ Change
			□Remove
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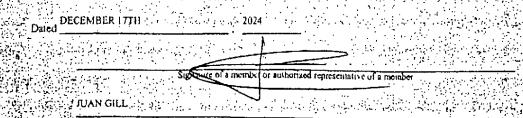
E. Effective date, if other than the date of filing:

(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):

Nate: 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:

DECEMBER 17711



Typed or printed name of signer

Filing Fee: \$25.00