9/10/25, 4:51 PM Division of Corporations

L25000342279

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : DEALER CONSULTING SERVICES, INC.
Account Number : I20010000121
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Fax Number : (786)410-6035

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R8 AUTO SALES LLC

Certificate of Status	0
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T. LEMIEUX

SEP 12 2025

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H25000342279

R8 AUTO SALES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/25/2025 and assigned Florida document number L25000342279.

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

23433 SW 129TH AVE
HOMESTEAD, FL 33032

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

23433 SW 129TH AVE
HOMESTEAD, FL 33032

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: JUAN S. ORTIZ GONZALEZ

New Registered Office Address: 23433 SW 129TH AVE
Enter Florida street address

HOMESTEAD, **Florida** 33032
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.

JUAN ORTIZ

If Changing Registered Agent, Signature of New Registered Agent

H25000325753

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

Title	Name	Address	Type of Action
AMBR	JUAN S. ORTIZ GONZALEZ	23433 SW 129TH AVE	☐Add
		HOMESTEAD, FL 33032	☐Remove
			■Change
AMBR	JUAN D. MONA GONZALEZ	23433 SW 129TH AVE	☐Add
		HOMESTEAD, FL 33032	☐Remove
			■Change
AMBR	OSCAR J. PADRON SERRANO	2455 NW 98TH ST	☐Add
		MIAMI, FL 33147	☐Remove
			■Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change

H25000326755 3

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)

(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.

Dated September 9th, 2025.

Signature of a member or authorized representative of a member

JUAN S. ORTIZ GONZALEZ

Typed or printed name of signee

Filing Fee: $25.00