M19000000181

(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	_	

Office Use Only



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2022 MAR -4 AM 8: 27

2022 MAR -4 PH 12: 48

Michael

MAR 0 7 2022 I ALBRITTON CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 527436 4305611

AUTHORIZATION :

COST LIMIT : \$/25.00

ORDER DATE: March 3, 2022

ORDER TIME : 9:35 AM

ORDER NO. : 527436-005

CUSTOMER NO: 4305611

FOREIGN FILINGS

NAME: ACCU-TRADE, LLC

____ CORPORATE

LIMITED PARTNERSHIP

XXX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XXX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI		. <u>. </u>
	Name of Foreign Limited Lia	bility Company
Dear S	r or Madam:	
The en	closed application, certificate and fee(s) are submitted	l for filing.
Please	return all correspondence concerning this matter to the	e following:
	Name of Person	_
	Firm/Company	
	Address	_
	City/State and Zip Code	_
E-m	il address: (to be used for future annual report notific	ation)
For fur	her information concerning this matter, please call:	
	Name of Person Area Cod) le & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount: Filing Fee \$\Bigcup \$30 \text{ Filing Fee & }\Bigcup \$55 \text{ Filing } \text{Certified of Status} \text{Certified of Status}	•
CR2E05.	(2012)	

2

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION 1 (1-4 must be completed)

1. Name of limited liability Company as it appe	ars on the records of the Florida D	epartment of		
State: Accu-Trade, LLC		دم		
Enter new principal office address, if applicable				
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		50		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		F.S. F.E.		
2. The Florida document number of this limited	liability company is: M19000000	0781 		
3. Jurisdiction of its organization: Delaware	,			
4. Date authorized to do business in Florida: 01	/22/2019			
SECTION II (5-9 complete only the applicabl				
5. New name of the limited liability company: (me	ATUSA2, LLC ust contain "Limited Liability Com	pany, ""L.L.C.," or "L.L.C.")		
(If name unavailable, enter alternate name adopt copy of the written consent of the managers or n must contain "Limited Liability Company," "L.I	nanaging members adopting the alt	usiness in Florida and attach a ernate name. The alternate name		
6. If amending the registered agent and/or registered agent and/or the new registered office		enter the name of the new		
Name of New Registered Agent:	<u>.</u> .			
New Registered Office Address:				
	Enter Florida	Enter Florida Street Address		
_	City	, Florida Zip Code		
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered ag the provisions of all statutes relative to the proper and accept the obligations of my position as region document is being filed to merely reflect a chang liability company has been notified in writing of	Registered Agent: gent and agree to act in this capaci er and complete performance of my istered agent as provided for in Ch ge in the registered office address, i	ty. I further agree to comply with duties, and I am familiar with apter 605, F.S. Or, if this		

id of Committee	N	A dday.	Towns of Aution
itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			\Add
	-		□Remo
	-		\ \Bigcap Add
	-		□Remo
	-		□Remo
			Add
	<u>-</u>		□Remo
 - 	 -		□Add
aforementioned am	icate, if required no more than 90 days endment(s), duly authenticated by the he law of which this entity is organized	official having custody of reco	□Remo

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ACCU-TRADE, LLC",

FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ATUSA2,

LLC" ON THE FIRST DAY OF MARCH, A.D. 2022, AT 10:58 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 202821708

Date: 03-03-22