

418000198172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

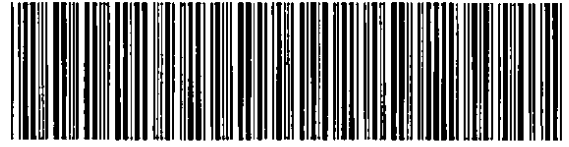
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BUMPER PROTECT, PRO, LIMITED LIABILITY COMPANY.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Olivencia, JSM

Name of Person

Professional Accounting Group, LLC

Firm/Company

PO Box 622521

Address

Orlando, FL 32862-2521

City/State and Zip Code

david@professionalaccountinggroupllc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Olivencia, JSM

407 207-5509

at (_____) _____

Name of Person

Area Code

Daytime 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)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT

TO

ARTICLES OF ORGANIZATION

OF

BUMPER PROTECT, PRO, LIMITED LIABILITY COMPANY.

(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 08/16/2018 and assigned Florida document number L18000198172.

This amendment is submitted to amend the following:

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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------------------|--------------------------------------|-----------------------|
| MGR | APPERANCE PERFECTION, LLC. | 11920 Cassiabark CT Orlando FL 32837 | Change |

The registered name above needs to be changed to the legal registered name with the FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS to reflect the true registered name of **APPEARANCE PERFECTION, LIMITED LIABILITY COMPANY** Date Filed 07/01/2016 Document Number L16000128725, as the MGR and correct from the misspelled name of **APPERANCE PERFECTION, LLC.** 11920 Cassiabark CT Orlando FL 32837

E. Effective date, if other than the date of filing: August 16, 2018 (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 August 16, 2018.

Leon Wright

Signature of a member or authorized representative of a member

Leon Wright

Typed or printed name of signee

FILED

2018 SEP 10 PM 4:59

SECRETARY OF STATE
TALLAHASSEE, FL