L21000214959

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| (F | Requestor's Name |) |
| | Address) | <u></u> |
| | | |
| . (4 | Address) | |
| (0 | City/State/Zip/Phor | ne #) |
| PICK-UP | MAIT | MAIL |
| (E | Business Entity Na | me) |
| | | |
| (Ľ | Document Number |) |
| Certified Copies | Certificate | es of Status |
| Special Instructions to | o Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration S Division of Co | | | | | | |
|---|---|--|--|--|--|--|
| | TENZIA AUTO CARE LLC | | | | | |
| SUBJECT: Name of Limited Liability Company | | | | | | |
| The enclosed Articles o | of Amendment and fee(s) are submitted for filing. | | | | | |
| Please return all corresp | pondence concerning this matter to the following: | | | | | |
| | ROGELIO CHACON | | | | | |
| | Name of Person | | | | | |
| | KONPETENZIA AUTO CARE LLC | | | | | |
| | Firm/Company | | | | | |
| | 2901 IST AVE WEST | | | | | |
| | Address | | | | | |
| | BRADENTON, FL 34205 | | | | | |
| | City/State and Zip Code | | | | | |
| | E-mail address: (to be used for future annual report notification) | | | | | |
| For further information | n concerning this matter, please call: | | | | | |
| ROGELIO CHACON | 786 683-7696 at () | | | | | |
| Name | e of Person Area Code Daytime Telepho | one Number | | | | |
| Enclosed is a check for | the following amount: | | | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ Certificate of Status | \$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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| KONPETENZIA AUTO CARE LLC | | |
|--|---|--------------------------------|
| (<u>Name of the Limited Liability</u> (A Florida L | Company as it now appears on our record imited Liability Company) | <u>s.</u>) |
| The Articles of Organization for this Limited Liability Cor | npany were filed on 05/07/2021 | and assigned |
| Florida document number L21000214985 | | - |
| This amendment is submitted to amend the following: | | |
| a. If amending name, enter the new name of the limite | d liability company here: | |
| he new name must be distinguishable and contain the words "Limited | d Liability Company," the designation "LLC | " or the abbreviation "L.L.C." |
| Inter new principal offices address, if applicable: | | 2 |
| Principal office address MUST BE A STREET ADDRE. | <u>SS)</u> | 321 |
| | | 5 11 |
| | | 8 |
| nter new mailing address, if applicable: | | - //- A |
| Mailing address MAY BE A POST OFFICE BOX) | -1 | <u>8.</u> 8. 2 |
| | | |
| 3. If amending the registered agent and/or registered ogent and/or the new registered office address here: | ffice address on our records, <u>enter</u> | the name of the new regis |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | i |
| | | orida |
| | 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.

If Changing Registered Agent, Signature of New Registered Agent

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> | Name | Address | Type of Action |
|--------------|-----------|-------------------------------|------------------------|
| MGR | ALEC SUPH | 11220 RANCH CREEK TER APT 312 | _ <u></u> ≣ Add |
| | | BRADENTON, FL 34211 | □Remove |
| | | | □ Change |
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| | Adding MGR: Alex Suph |
|-------------------------|---|
| | Address: 11220 Raich Creek Ter. Apt 312 |
| | Address: 11220 Ranch Creek Ter. Apt 312 Bradontes, Fl. 34211 |
| | Adding EIN: 87-0833204 |
| | |
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| | |
| :NOU | ctive date, if other than the date of filing: |
| If the rec record is | ord 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 filed. |
| | d 11/3/21 2021 |

Filing Fee: \$25.00