## 121000413446

(Re	questor's Name)	
(Ad	dress)	
·	·	
· · · · · · · · · · · · · · · · · · ·		
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<del>f)</del>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates o	of Statue
Certified Copies	_ Certificates e	
Special Instructions to	Filing Officer:	
·		

Office Use Only



200400350552

01/17/23--01015--008 +\*25.00

3/21/23 VW. 2023 JAN 17 PH 3:56

## **COVER LETTER**

TO:

Registration Section

Division of Corpo	rations		
SUBJECT: MIKE'S	Quality Pre	- Uwned Appliance ited Liability Company	es, LLC
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	Micliael	Harp Name of Person	
	Mike's Qu	ality Appliance	S, LLC
	1734 Ji	11jan Rd Address	<del></del>
	Brandon	FL 335/0 City/State and Zip Code	
	Appliance A E-mail address: (	1ike 21@ gma1/. Co to be used for future annual report noti	∂n'î fication)
For further information conc	erning this matter, please c	all:	
Michael Ha Name of Pe	rson	at ( <u>863)</u> <u>618 –</u> Area Code Daytim	e Telephone Number
Santagad in a about for the	allauring amount.		
Enclosed is a check for the f	_		<b>5 6</b> (0 00 000 00
☑ \$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 Sec		Registration Se	
Division of Corp	porations	Division of Cor	-
P.O. Box 6327 Tallahassee, FL	32314	The Centre of T	e Street, Suite 810
rananasoc, i L		211211110	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1 1

NIKES UNGLITY P) (Name of the Limited Lie	Ye-Wined Appliances, LLC    ability Company as it now appears on our records.)   lorida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L210004134</u>	ity Company were filed on $\frac{9/20/21}{}$ and assigned
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the Mike's Quality Apoliance The new name must be distinguishable and contain the words	limited liability company here:  "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 AL	: 1717 E. Busch Blvd
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registon agent and/or the new registered office address her	tered office address on our records, enter the name of the new registered re:
Name of New Registered Agent:  New Registered Office Address:	1717 E. Busch Blvd. Suite 110  Einer Florida street address
_	Tampa , Florida 33612  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 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
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			☐ Change
			🗀 Add
		□Remove	
		□Change	
		□Add	
		Пенюve	
		□Change	
		□Add	
	•		□Remove
			□Change

_	
-	
-	
_	
_	
_	
_	
-	
_	
_	
_	
_	
_	
ian effec <u>Note:</u> I	e date, if other than the date of filing:
record I is file	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 d.
ated _	Ol   11   23
	Whater-
	Signature of a member or authorized representative of a member
	Michael Hurp Typed or printed name of signer

Filing Fee: \$25.00