4/20/22, 5:15 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000143902 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ASSURED ACCOUNTING AND TAX SERVICES

Account Number : I20180000048 : (954)793-0353 Phone : (954)944-3163 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PREMIER PRO DETAILS, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

APR 2 2 2022 T. LEMIEUX

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H220001439023)))

(((H220001439023)))

PREMIER PRO DE	
(A Florida Limited L	iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L22000134417</u> .	were filed onand assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabl	llty company here:
CAR PRO DETAIL, LLC.	
The new name must be distinguishable and contain the words "Limited Liabili	ity 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)	
m s Walle	28 FAS
Enter new mailing address, if applicable:	22
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered office a	ddress on our records, enter the name of the new registered
agent and/or the new registered office address here:	
	≘ <u>+</u> 5
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
<del></del>	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
7600	nging Registered Agent. Signature of New Registered Agent

(((H220001439023)))

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>	Address	Type of Action
			DAdd
			Remove
			□Change
			OAdd
			Change
			(DAdd
		·	□Remove
			[]Change
			□Λdđ
			□Remove
		<del></del>	□Change
			□Remove
			□Change
			DAdd
			□Remove
			(((H2\)\)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

. . . . .

(((H220001439023)))

	<del></del>				
				·	
		<del></del>			
		<del></del>			<del></del>
an enecuve date in lote: If the date	f other than the date of f s listed, the date must be specific inserted in this block does re- tive date on the Department	not meet the applicable	te of filing or more than statutory filing requi	(optional) 90 days after filing.) Pursu ements, this date will n	isnt to 605.0207 () of be listed as th
	a delayed effective date, bu	t not an effective time,	at 12:01 a.m. on the	earlier of: (b) The 90th	i day after the
	APRIL 20th	2022 .			
)sted	An IOD Bom				
Pated					
record specifies d is filed.				, ,	-