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SECRETARY OF STATE

A. BUTLER MAR 2 4 2022

## **COVER LETTER**

TO: Registration Division of	n Section Corporations		
	IESEL TECHNICAL SERVICES	LLC	
SUBJECT:	Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	s of Amendment and fec(s) are sul	bmitted for filing.	
Please return all corre	espondence concerning this matter	r to the following:	
	PAOLA LOPEZ QUIROZ	Z	
		Name of Person	<del>_</del>
	J&V DIESEL TECHNIC	AL SERVICES LLC	
	·	Firm/Company	
	11762 BOGGY CREEK I	RD.	
		Address	
	ORLANDO, FL 32824		
		City/State and Zip Code	
	paolandrea211@gmail.con	n (to be used for future annual report no	
For further information	e-mail address: on concerning this matter, please of	·	uncation)
PAOLA LOPEZ QU	IROZ	321 315-6859	
	ne of Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	e 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)
P.O. Box 6	on Section of Corporations	Street Address: Registration S Division of Co The Centre of 2415 N. Monre	orporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED 2022 HAR II AM 6: 37

J&V DIESEL TECHNICAL SERVICES LLC

(Name of the Limited Liability Comp.	any as it now appears (	on our records.).	1
(A Florida Emilica	Claumity Company)	MALEAHAS OF STATE	
(Name of the Limited Liability Comp. (A Florida Limited The Articles of Organization for this Limited Liability Company	y were filed on $\frac{02/10}{}$	0/2022 and as	signed
Florida document number L22000069021			
<del></del>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desi	ignation "LLC" or the abbreviation "I	L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			<del></del>
Enter new mailing address, if applicable:	<del></del>		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office	address on our rec	ords, enter the name of the ne	w registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	a street address	
		, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
	-		

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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	
			□Change
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		<del></del>	☐ Change
			□Add
			□Remove
			□ Change

	ARTICLES HIS LAST NAME IS SPELLED "PEREA" THE CORRECT SPELLING IS "PEREZ" HIS FULL
	CORRECT SPELLING OF HIS NAME IS CRISTIAN C. PEREZ TABARES
(If an e Note	ctive date, if other than the date of filing:
the reco	
Date	d
	Signature of a member or authorized representative of a member
	Poola Lope 7 Quizo 7  Typed or printed name of signee

Filing Fee: \$25.00