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### **COVER LETTER**

	ration Section n of Corporations
SUBJECT:	ARCHER AUTOMOTIVE & TIRE , LLC.
SUBJECT:	Name of Limited Liability Company
The enclosed Ar	ticles of Amendment and fee(s) are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	Richard L. Feagle Name of Person
	ARCHER AUTOMOTIVE & TIRE LLC Firm/Company
	15901 Sw Archer Rd
	Archer, FL 32(018)  City/State and Zip Code  Feagle 13620@gmail.com  E-mail address: (to be used for future annual report notification)
For further infor	mation concerning this matter, please call:
Rich	Name of Person  at (35) 495-2485  Area Code Daytime Telephone Number
Enclosed is a che	eck for the following amount: Paid \$52.50 4/26/22 CE 9253
□ \$25.00 Filin	Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	See Overletter See Overletter
Regist Divisi	g Address: tration Section on of Corporations Box 6327  Street Address: Registration Section Division of Corporations The Centre of Tallahassee
	passee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## ARCHER AUTOMOTIVE & TIRE LLC

( <u>Name of the Limited</u> (A	Liability Compa Florida Limited	iny as it now appears on or Liability Company)	ir records.)	_
The Articles of Organization for this Limited Liab Florida document number <u>L040005</u>		were filed on		and assigned
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the new name must be distinguishable and contain the work		<del></del>	ion "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable of the control				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>2X)</u>			
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our record		
Name of New Registered Agent:	<u>no</u>	change.	to '	Cichard L Fragle
New Registered Office Address:		Enter Florida stre	vet address	· · ·
		City	, Florida _	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>	<u>Name</u>	Address	Type of Action
MGR	Ryan M. Feagle	- 90105W 135th St	VDxdd
		90105W 135th St Archer, F232418	□Remove
₹•			□Change
			DAdd
		<del></del>	□Remove
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			□Remove

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(If an effective of Note: If the	te, if other than the date of filing:
he record spec ord is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Guly 8  2622  Signature of a member of authorized representative of a member
_	Richard L. Feagle Typed or printed name of signee