## L05000024054

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies		of Status
Special Instructions to	Filing Officer:	
WILE- 10557	LLC	

Office Use Only



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K.SALY EXAMINER APR 13



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 11, 2016

DETAILS CAR SPA MICHAEL MCGOWAN 27351 OAK SHADOW LANE MOUNT DORA, FL 32757

SUBJECT: DETAILS CAR SPA, LLC

Ref. Number: L05000024054

We have received your document for DETAILS CAR SPA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 016A00002965

## **COVER LETTER**

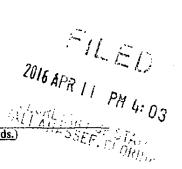
O.	ion of Corpor			
SUBJECT:	Details Car Sp	a		
SUBJECT		Name of Limit	ed Liability Company	<del></del>
The enclosed A	Articles of An	nendment and fee(s) are subm	nitted for filing.	
Please return a	all corresponde	ence concerning this matter to	o the following:	
		Michael McGowan	· monator	
			Name of Person	<del> </del>
		Details Car Spa		
			Firm/Company	<del></del>
		27351 Oak Shadow Lane		
			Address	
		Mount Dora FL 32757		
			City/State and Zip Code	_
	-	bananabreadphoto@gmail.co		
		E-mail address: (to	be used for future annual report notifi	cation)
For further info	ormation conc	erning this matter, please cal	11:	
Michael McGe			407 907-0244 at ()	
	Name of Pe	erson	Area Code Daytime	Telephone Number
Enclosed is a c	check for the f	ollowing amount:		
■ \$25.00 Fil	ing Fee	□ \$30.00 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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION . OF



Details Car Spa

(Name of the Limited Liability Company as it now appears on our records.

ited Liability Company)	The ORD A	
pany were filed on 03-10-2005	and assigned	
•		
Liability Company," the designation "LLC"	or the abbreviation "L.L.C."	
<u> </u>		
•		
d office address on our records, here:	enter the name of the no	
Enter Florida street address		
	ida Zip Code	
•	•	
agree to act in this capacity. I furti- lete performance of my duties, and as provided for in Chapter 605, F. ffice address, I hereby confirm that	I am familiar with and S. Or, if this document is	
	bany were filed on 03-10-2005  liability company here:  Liability Company," the designation "LLC" of the company of the designation and the company of the c	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: FILED MGR = Manager AMBR = Authorized Member **Type of Action Title Name Address** ☐ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove . Change □ Add □ Remove ☐ Change \_□ Add □ Remove

☐ Change

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an effective date is listed, the listed in the listed in the lister in t	than the date of filing; the date must be specific and of d in this block does not me e on the Department of St	cannot be prior to dat eet the applicable s	e of filing or more th statutory filing req	(optional) an 90 days after filing.) uirements, this date v	Pursuant to 605,0207 ( vill not be listed as the
e record specifies a The 90th day after	delayed effective da the record is filed.	ate, but not an	effective time	, at 12:01 a.m. o	n the earlier of:
nted Februar	y 7 <sup>th</sup> ///.	2016.			
	Signature of a m	ember or authorized	representative of a	nember	
			ne of signee		

Page 3 of 3

Filing Fee: \$25.00