## L08000073393

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
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## **COVER LETTER**

TO:	Registration Division of C	n Section Corporations
eup in		ON CARWASH LLC
SUBJE	CI;	Name of Limited Liability Company
The enc	closed Articles	s of Amendment and fee(s) are submitted for filing.
Please r	eturn all corre	espondence concerning this matter to the following:
		Eric or Kelly Vanderheyden
		Name of Person
		Trenton Carwash
		Firm/Company
		9029 SW 15TH COURT
		Address
		TRENTON, FL. 32693
		City/State and Zip Code
		kv4angel@yahoo.com  E-mail address: (to be used for future annual report notification)
For furt	her informatio	on concerning this matter, please call:
	/anderheyden	352 317-0483 <b>4. 352. 463. 30/0</b>
	Nan	at () ne of Person
Enclose	ed is a check fo	or the following amount:
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  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

TRENTON CARWASH "LLC"

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/30/2008 and assigned Florida document number L08000073393 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: THE OLD TRENTON CARWASH LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 9029 SW 15TH COURT Enter new principal offices address, if applicable: TRENTON, FL. 32693 (Principal office address MUST BE A STREET ADDRESS) 9029 SW 15TH COURT Enter new mailing address, if applicable: TRENTON, FL. 32693 (Mailing address MAY BE A POST OFFICE BOX) cn B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 Changing Registered Agent, Signature of New Registered Agent

, Florida

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> <u>Address</u> **Type of Action** \_□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add Recorpove Change 59 □ Remove □ Change □ Add □ Remove

☐ Change

	ding any other information, enter change(s) here: (Attach additional sheets, if nece	
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(If an effeo Note: I	e date, if other than the date of filing:  (optional tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, this nat's effective date on the Department of State's records.	filing.) Pursuant to 605.0207
he reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a Oth day after the record is filed.	.m. on the earlier o
	9-18 2015	T. 2
Dated _	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Dated _	9-18, 2015.  Belly of Canada Regoler  Signature of a member or authorized representative of a member	2015 SEP SEURE D ALLAHA
Dated _	Signature of a member of authorized pepresentative of a member	
Dated _	Signature of a member or authorized representative of a member  Kelly I Vanderheyden  Typed or printed name of signee	

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Filing Fee: \$25.00