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COVER LETTER

TO:

TO: Registration So Division of Cor			·	
	E CUSTOM PAINT AND BO	DDY, LLC		
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	JACQUELINE HERNAN	DEZ-VALDES		
		Name of Person		
	LAW OFFICES OF JACQ	OUELINE R. HERNANDEZ-VAL	.DES. P.A.	
	Firm/Company			
	2474 SECOFFEE TERRA	CE		
		Address		
	MIAMI, FL 33133			
		City/State and Zip Code	-	
	JRHVESQ@BELLSOUTH			
For further information c	e-mail address: to	to be used for future annual report no all:	nneationy	
JACQUELINE HERNA	NDEZ-VALDES	305 860-6015 at ()		
Name o	of Person		me Telephone Number	
Enclosed is a check for t	he following amount:			
☑ \$25.00 Filing 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 Addres Registration	_	Street Address: Registration S	ection	
Division of C	Corporations	Division of Co	orporations	
P.O. Box 632		The Centre of	Tallahassee oe Street, Suite 810	
Tallahassee, l	1 L J L J L J L J L J L J L J L J L J L	2413 N. WOIII	oc succi, sanc 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ALL STATE CUSTOM PAINT AND BODY, LLC

The Articles of Organization for this Limited Liability Company were filed on July 8, 2011

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

This amendment is submitted to amend the fo	J	1		
A. If amending name, <u>enter the new name</u>	of the limited liability	<u>y company ner</u>	<u>e</u> :	
The new name must be distinguishable and contain the	words "Limited Liability	Company," the de-	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appl	icable: _			
Principal office address MUST BE A STRE	ET ADDRESS)			
	_			
				<u> </u>
•	_			
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•	= BOX) = -			
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office add	lress on our re	cords, enter the na	me of the new regist
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office add	lress on our re	cords, <u>enter the na</u>	me of the new regist
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office addr	registered office add ress here:		eords, enter the na	
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:	registered office address here: The Law Offices o	f Jacqueline R. I		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address:	registered office add ress here:	f Jacqueline R. F		
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:	registered office address here: The Law Offices o	f Jacqueline R. F	ernandez-Valdes, P la street address	Λ
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:	The Law Offices o	f Jacqueline R. F	ernandez-Valdes, P la street address	

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

LAW Offices of Inequalize R. HERMANDEZ-VAIDES, F.

by: Inequalize HERMANDEZVAIDES, EST.

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>	Name	<u>Address</u>	Type of Action
MGRM	Mora, Elenio	3416 SW 24 Street	
		Miami, Fl 33135	≣Remove
			□Change
MGRM	Mora, Yrza	3416 SW 24 Street	≣Add
		Miami, FL 33135	□Remove
			□ Change
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ective date, if other the effective date is listed, the case. If the date inserted in	this block does no	ot meet the appl	icable statutory (or more than 90 days illing requirements	optional) after filing.) Pursuant (i, this date will not b	o 605.020 e listed a
ument's effective date or	i the Department (of State's record	ls.			
cord specifies a delayed of filed.	effective date, but	not an effective	time, at 12:01 a.	m, on the earlier o	of: (b) The 90th day	rafter the
March 15		2020	_			
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Filing Fee: \$25.00