L12000008610

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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J. HARRIS

COVER LETTER

TO: Registration'S Division of Co			
decent who	eel llc		•
SOBJECT:	Name of Lim	nited Liability Company	
		·	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	christina stoltz	:	
		Name of Person	
	decent wheels llc		
		Firm/Company	
	451 sandpiper dr		
		Address	· ·
	satellite beach,fl 32937		
		City/State and Zip Code	
	goodfolksfinancial@gmail.		
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please co	all:	
christina stoltz		321 408 7345	
Name o	of Person	Area Code Daytime	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 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



April 14, 2016

CHRISTINA STOLTZ 451 SANDPIPER DR SATELLIT BEACH, FL 32937

SUBJECT: DECENT WHEELS LLC Ref. Number: L12000008610

We have received your document for DECENT WHEELS 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 registered agent must sign accepting the designation.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 416A00007711

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

decent wheels llc								
(Name of the Limit	ed Liability Company a (A Florida Limited Liabi	s it now appears on o	ur records.)					
		t.			and as	signed		
					•	Ü		
Florida document number	<u> 8410</u> .							
This amendment is submitted to amend the foll	owing:							
A. If amending name, enter the new name o	f the limited liability	company here:						
The new name must be distinguishable and contain the v	vords "Limited Liability (Company," the designa	tion "LLC" or th	e abhrev	iation "I	.L.C."		
Enter new principal offices address, if applic	cable:							
(Principal office address MUST BE A STREE	ET ADDRESS)					_		
	_			굿.			_	
•						,		
Enter new mailing address, if applicable:	, :			35	スプ	i*		
3			 -	- a	<u></u>	,	_	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u> _			7,7		<u>.</u>		
	_					granting	_	
	and assigned erL 20 6000 8 \(\begin{align*} \) inited to amend the following: enter the new name of the limited liability company here: guishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." fices address, if applicable: Is MUST BE A STREET ADDRESS) ress, if applicable: BE A POST OFFICE BOX) registered agent and/or registered office address on our records, enter the frame of the new rethe new registered office address here: Registered Agent: Christina stoltz d Office Address: Enter Florida street actairess							
• •	-	e address on our	records, ent	er the	<u>ńame</u>	of the	new	
registered agent and/or the new registered o	flice address here:							
Name of New Registered Agent:	christina stoltz						_	
New Registered Office Address:	451 and piper dr		•					
	Enter Florida street address							
	satellite beach		, Florida	32937				
		City			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.

Changing Registered Agent, Stenature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or samoved from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
mgr	christina stoltz	451 sandpiper drive satellite beach,	≅ Add
			□ Remove
			☐ Change
MP.	JOHN S. STER	:	□ Add
		YELLOW FRENCH P	Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
		: 	Change
		**************************************	R 12
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ocument	's effective dat	te on the De	pariment of	State's re	coras.						
record	d specifies a	a delayed	effective	date, bu	ut not an	effective	time, at	12:01 a.	m. on the	e earli	er (
The 90	th day afte	r the reco	rd is filed	1.	•		·				
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		7-7 VW	<u> </u>		2	representative				-5.	

Page 3 of 3

Filing Fee: \$25.00