## L13000128452

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D. SCOTT JUL 7 2017

## **COVER LETTER**

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CLID ID	PALM BI	PALM BEACH SCRATCH REPAIR LLC					
SUBJEC	-1: <u></u> -	Name of Lin	Name of Limited Liability Company				
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The encl	osed Article of	Amendment and fee(s) are sub	omitted for filing.		and the second		
Please re	turn all corresp	ondence concerning this matter	to the following:				
,		e for a superior					
		BRAD PANDO					
			Name of Person		_		
		PALM BEACH SCRATC	CH REPAIR LLC				
			Firm/Company		_		
		7078 CHESAPEAKE CIR	CLE				
			Address		_		
		BOYNTON BEACH, FL	33436				
			City/State and Zip Code		-		
		COLOR40@COMCAST.N	IET				
1 21		E-mail address: (	to be used for future annual report notifica	tion)			
For furthe	er information o	concerning this matter, please c	all:				
BRAD P	ANDO		561 248-4633				
··	Name o	of Person	at ()	elephone Numbe	<del></del> Г		
Enclosed	is a check for t	he following amount:			_		
<b>≅</b> \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status,& T Copy   T I copy is enclosed)		
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente	ons	Mark 49		

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PALM BEACH SCRATCH REPAIR LLC			
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears o ability Company)	n our records.)	
The Articles of Organization for this Limited Liability Company v. Florida document number <u>L13000128452</u>	were filed on	09/11/2013	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:	:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the desig	gnation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address here:  Name of New Pagistered A gent:	ce address on ou	ır records, <u>enter</u>	the name of the ne
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida :	street address Florida	
	City	, FIOTIGA	JZip Coden 1
New Registered Agent's Signature, if changing Registered Agent:			第9 <sub>星</sub> 0
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a	erformance of my ovided for in Chap	duties, and I am joter 605, F.S. Or,	ree to comply with th familiar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	<u>Address</u>	Type of Action
MGR	VANESSA PANDO	7078 CHESAPEAKE CIRCLE	<b>⊟</b> Add
		BOYNTON BEACH, FL 33436	Remove
			□ Change
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ffective date, if can effective date is listed.  If the date in occument's effective	isted, the date mu serted in this b	ust be specific at block does not	nd cannot be pri meet the appl	icable statutor	ng or more than ry filing requir	(option 90 days after fil ements, this d	ling.) Pursuant to 6	05.0207 ( sted as t
e record specif The 90th day	ies a delaye after the re	d effective cord is filed	date, but r l.	not an effec	tive time, a	it 12:01 a.r	n. on the ear	lier of:
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atedBRAD F	$\leq$	Signature of a	member or au	thorized represe	ntative of a me	nber.	TAS COF STA	FILED

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