## L14000047330

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## **COVER LETTER**

Registration Section

TO:

Division of	Corporations		
	ist Auto Parts and Service, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sub	omitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
	Douglas K. McKoy		
		Name of Person	<del></del>
	Law Office of Douglas K.	. McKoy, P. A.	1
	·	Firm/Company	<del></del>
	302 N. Main St., Suite B		i i i i i i i i i i i i i i i i i i i
	<del></del>	Address	
	Trenton, FL 32693		ċ.
	doug@chieflandlegal.com	City/State and Zip Code	<del></del>
	= =	(to be used for future annual report not	ification)
For further informati	on concerning this matter, please c	eall:	
Douglas K. McKoy		352 490-4488 at ()	1
Na	me of Person	Area Code Daytin	e Telephone Number
Enclosed is a check t	or the following amount:		
□ \$25,00 Filing Fe	e ■ \$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)
Re Di P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 flahassee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 33	on rations enter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gilchrist Auto Parts and Service, LLC

company has been notified in writing of this change.

(Name of the Lim	ited Liability Company as it now ap (A Florida Limited Liability Compar	oears on our records.)	<del></del>
The Articles of Organization for this Limited I Florida document number <u>L14000047330</u>	03/21/2014	and assigned	
This amendment is submitted to amend the following	llowing:		
A. If amending name, enter the new name	of the limited liability company	/ here:	
The new name must be distinguishable and contain the	words "Limited Liability Company." (	ne designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if appli			<b>3</b> 4
(Principal office address MUST BE A STREET ADDRESS)			2A
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		on our records, enter the	name of the ne
• •	1219 N. Main St.		1
New Registered Office Address:		Florida street address	
	Bell	Florida 32619	
New Registered Agent's Signature, if changing	City  Registered Agent:		Zip Code
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg- being filed to merely reflect a change in the	red agent and agree to act in the per and complete performance gistered agent as provided for i	of my duties, and I am fam in Chapter 605, F.S. Or, if t	iliar with and his document is

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
AMBR	Floyd Underhill	P. O. Box 788, Bell. FL 32619	
		· · · · · · · · · · · · · · · · · · ·	Remove
			Change
	<del> </del>	<del></del>	Add
			Remove
			□ Change
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	<del></del>		bbA
			Remove
			│ □ Change

). If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	<del></del>
	<del></del>
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<del></del>	<u> </u>
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuar Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the b) The 90th day after the record is filed.	earlier of:
Dated 1 2 19	
Signature of a member or authorized representative of a member	<del></del>
Typed or printed name of signee	<del></del>

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Filing Fee: \$25.00