

L14000086670

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

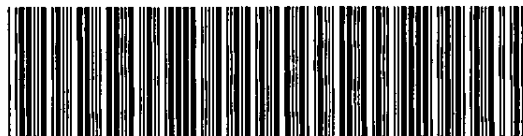
(Business Entity Name)

(Document Number)

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15 JUN - 1 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN - 3 2015

T. BROWN

amend

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MITCHELL HAMMOCK CAR WASH, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHAD J. IBBOTSON
Name of Person

MITCHELL HAMMOCK CAR WASH, LLC
Firm/Company

1859 RINEHART RD.
Address

SANFORD, FL 32771
City/State and Zip Code

Chad@carwashfl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHAD J. IBBOTSON at (407) 461-9264
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Mitchell Hammock Car Wash, LLC

**1859 Rinehart Road
Sanford, FL 32771**

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Mitchell Hammock Car Wash, LLC

To Whom It May Concern:

Please find enclosed an Amendment to the Articles for Mitchell Hammock Car Wash, LLC whereby we are adding three individuals as Managers of the LLC.

Should you have any questions I may be reached by telephone at 407-461-9264 and any correspondence should be addressed to my attention at 1859 Rinehart Road, Sanford, FL 32771.

Sincerely,



Chad J. Ibbotson

Manager

Mitchell Hammock Car Wash, LLC

TO
ARTICLES OF ORGANIZATION
OF

MITCHELL HAMMOCK CAR WASH, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
15 JUN -1 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 5/29/14 assigned
Florida document number L14000086670.

This amendment is submitted to amend the following:

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," the designation "LLC" or the abbreviation "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 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

_____, Florida _____

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.

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ROA STEPHENSON	1859 RINEHART RD.	<input checked="" type="checkbox"/> Add
		SANFORD, FL 32771	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ANTHONY SCHISSEL	1859 RINEHART RD.	<input checked="" type="checkbox"/> Add
		SANFORD, FL 32771	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DOUGLAS RUSSELL	1859 RINEHART RD.	<input checked="" type="checkbox"/> Add
		SANFORD, FL 32771	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(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.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

MAY

2015

Signature of a member or authorized representative of a member

CHAD J. LABOTSON

Typed or printed name of signee