

L14000086874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2019 JUN 04 PM 4:24
TALLAHASSEE, FL
TALLAHASSEE, FL

T GLASS

JUN 10 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2019

PAUL AKANNI
746 WAKEMONT DR
ORANGE PARK, FL 32065

SUBJECT: TRYGOD AUTO PAINT & BODY WORK LLC
Ref. Number: L14000086874

We have received your document for TRYGOD AUTO PAINT & BODY WORK 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 attached form must be completed in order to file the document.

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) 245-6052.

Tacarri K Glass
Regulatory Specialist II

Letter Number: 819A00010522

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AND
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2019 JUN 04 PM 1:35

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRYGOD AUTO PAINT & BODY WORK 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:

Paul Akanni
Name of Person

TRYGOD AUTO PAINT & BODY WORK LLC
Firm/Company

746 Wakemont Drive
Address

Orange park, FL 32065
City/State and Zip Code

Trygod2008@yahoo.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Paul Akanni at (904) 502 3643
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)
- + \$5 for Certificate of Status.

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

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

TRY GOD AUTO PAINT & BODY WORK LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/30/2014 and assigned
Florida document number L14000086874.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TRY GOD AUTO SALES, LLC

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)

746 Wlakemont Dr
Orange park
FL 32065

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

746 Wlakemont Dr
Orange park
FL 32065

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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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

City _____ Florida _____ 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

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>	<u>Address</u>	<u>Type of Action</u>
Mgr	Greene Shawn G.	746 Wakemont Dr	<input type="checkbox"/> Add
		Orange park FL 32065	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

42-6446-6107
FBI - NEW YORK
JAN 11 1964


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FILED

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 05/31/2019 .

31/2019



Signature of a member of

Signature of a member or authorized representative of a member

Раш Аканни

Typed or printed name of signee