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(Requestor	's Name)
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PICK-UP	WAIT MAIL
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Certified Copies	Pertificates of Status
Special Instructions to Filing C	Officer:
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SECRETARY OF STATE
TALLAHASSEE, FLORID.

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COVER LETTER

•	COVER LETTER
TO:	Registration Section Division of Corporations
SUBJI	ECT: Magnificent Mobile Cow Wash, L.L. C. Name of Limited Liability Company
	1
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Joni Charlestain Name of Person
	Magnificent Mobile Car wash, L.L. C
	728 DOGWOOD RD.
	West palm beach, Fl 33409 City/State and Zip Code Magni Ficent Cw Quahoo. Com JE-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
Jor	Name of Person at (501) 95+7924 Area Code Daytime Telephone Number
\$22	ed is a check for the following amount: 5.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status Charlest win Charlest wi

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

JC

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

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Joni Charlestain	728 DOGWOOD RA	Add
		West Palm Beach, FI	☐ Remove
		33409	
			Add
			□ Remove
			🗆 Add
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			Add
			□ Remove
			Add
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 07 1400011 Florida document number 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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

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-			
e effective date mu	other than the date of fili ist be specific, cannot be prior to nt is filed by the Florida Departm	date of receipt or tiled date and cannot be	(optional) more than 90 days after
ated	11/11	<u>, 2014</u> .	
	v		
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Page 3 of 3

Filing Fee: \$25.00

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