114000127875

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COVER LETTER

Division of Cor	porations		
cupiece	Guzik	Investments, LLS	
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Anicles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ndence concerning this matter to	o the following:	
	Stephen S. Guz	ik	
		Name of Person	
	Guzik Investme	nts, LLC	
		Firm/Company	
	12229 Mango C	ourt	
		Address	
	Spring Hill, Flori	da 34609	
		City/State and Zip Code	
	ssgcarwash@gr		
		be used for future annual report notifi	cation)
For further information co	oncerning this matter, please cal	1:	
Stephen S. Guzik		352 942-7555	
Name o	f Person		Telephone Number
Enclosed is a check for th	e 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)

MAILING ADDRESS:

Registration Section

TO:

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

Guzik Investr (Name of the Limited Liability Compa (A Florida Limited	•	n our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL14000127875	were filed on Octo	ober 18 2017	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:	;	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the desig	unation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			·
(Principal office address MUST BE A STREET ADDRESS)			DIVISION
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			9. 5. O.
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on or e:	ır records, <u>enter t</u>	he name of the
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	1,71107 7 107 1007		
	City	Florida	Ziv Code

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBER	Stephen S. Guzik	12229 Mango Court	
		Spring Hill Florida 34609	Remove
			□ Change
			Add
			☐ Remove
			Change
			□ Add
			☐ Remove
			☐ Change
		.	□ Remove
			Change
			Remove
			□ Change
			□ Remove
			☐ Change

Change Title of Stephen S. Guzik	k from MGR to	AMBER	
		<u> </u>	
			18
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	···		폊
			59
fective date, if other than the date of filing:			(optional)
an effective date is listed, the date must be specific and cannot be ote: If the date inserted in this block does not meet the a	pplicable statutoi	ng or more than 90 day ry filing requirement	s after filing.) Pursuant to 6 s, this date will not be li
cument's effective date on the Department of State's rec	oras.		
e record specifies a delayed effective date, bu	t not an effec	tive time, at 12:	01 a.m. on the ear
The 90th day after the record is filed.		α	
June 08 2018			
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Page 3 of 3

Filing Fee: \$25.00