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FILED AND IN

M. MILLIGAN

OCT 02 2014

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Brother's Detailing 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:
Sergio E. Hernandez Name of Person
Brother's Detailing LLC Firm/Company
2716 Eagle Ridge Loof
City/State and Zip Code Segioch 91 @ gmail. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sergio E. Hernandez at (786) 218-6922 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \(\text{Certificate of Status} \) \(\text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \) \(\text{Certified Copy (additional copy is enclosed)} \) \(\text{Certified Copy (additional copy is enclosed)} \)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 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 "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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

Man			
MGR = M AMBR = A	anager uthorized Member		
<u>Fitle</u>	<u>Name</u>	Address	Type of Action
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	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
		· .	
	 Effective	date, if other than the date of filing: (optional)	
(The effective	date, if other than the date of filing:	
	Dated	October 1, 2014.	
		Signature of a member or authorized representative of a member	
		Sergio E. Harnandez	
		Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

SEGRETARY OF STATE