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(Req	uestor's Name)	
(Add	ress)	, · -
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(City.	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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O SIMMONS OCT 1.5 2018

COVER LETTER

TO: Registration Division of C			
SUBJECT:	Anderson Clean Name of Lin	Car Group, LLC mited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
	Em	Name of Person	
		Clean Car Group, Firm/Company	LLC
	515	2nd Avenue South	4
		elersburg, FL 3370 City/State and Zip Code 1 AVI 575. com to be used for future annual report not	
For further information	E-mail address: concerning this matter, please c	•	ification)
Emery	Anderson of Person	at (<u>127</u>) <u>480 -</u> Area Code Daytim	- 7868 ne 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)

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 ARTICLES OF ORGANIZATION OF

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Company as it now appears on our r Limited Liability Company)	ecords.)
mpany were filed on 11 [4	and assigned
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red office address on our rec <u>ss here</u> :	cords, enter the name of the
Enter Florida street a	ddress
Enter Florida street a	ddress , Florida
ite ite	ty Company as it now appears on our received Liability Company) company were filed on

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>	Address	Type of Action
AMBR	Thomas L. Ladbetter	20220 Burnside Place	□ Add
		Unit 1803	⊠ Remove
		Estero, FL 33928	□ Change
AMBR	Emery Anderson	_ 575 2nd Accenue South	iX Add
		St. Pelesburg, FL 33701	□ Remove
			Change
			Remove
		· ·	(D)Chairea
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Minte.	re date, if other to etive date is listed, the f the date inserted nt's effective date	m mis block doe	is not meet t	ne applicab	date of filing or le statutory fil	more than 90	(option days after nents, this	onal) filing.) Pu date will	rsuant t not b	o 605.02 e listed
the reco	ord specifies a 6 90th day after	delayed effec the record is	tive date, filed.	but not a	an effective	time, at	12:01 a	.m. on	the e	arlier
Dated _	September	2Am		018						
		Signatur	re of a member	er or authoriz	ed representati	ve of a memb				_
					representati	· · · · · · · · · · · · · · · · · · ·	-1			

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Filing Fee: \$25.00