

L14000172540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

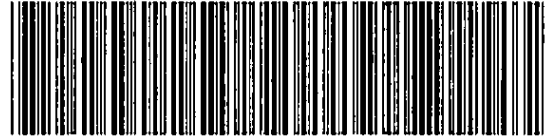
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023
STATION
FALLS CHURCH, VA
IDA

PAID
ED

198

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Terry's Auto 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:

James Horseth
Name of Person

Terry's Auto LLC
Firm/Company

2702 Tidal Creek Dr
Address

Holaday FL 34691
City/State and Zip Code

JHorseth@Tampabay-fl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Horseth at (813) 814-41136
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)

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Terry Auto 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 10-30-2014 and assigned Florida document number 214000172540.

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 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)

~~_____~~
~~_____~~
~~_____~~

FILED
2014 OCT 31
TALLAHASSEE, FL
IDA

FILED

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

~~_____~~
~~_____~~
~~_____~~

FILED
2014 OCT 31
TALLAHASSEE, FL
IDA

FILED

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 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	Jenna Nowseth	2702 Tidal creek	<input checked="" type="checkbox"/> Add
		Holiday FL 34691	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kimberly CIAN	2702 Tidal creek	<input checked="" type="checkbox"/> Add
		Holiday FL 34691	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SEAL
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FALL
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