

L5000018196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700320516777

11/13/18--01029--000 ++\$1.00

FILED
CLERK OF STATE
NOV 13 AM 11:58
SNOOK COUNTY, ARIZONA

NOV 03 2018

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PrimeTime Tires, 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:

Vito Nixon
Name of Person

Primetime Tires
Firm/Company

7690 17th Way N.
Address

St. Pete FL 33702
City/State and Zip Code

Vnixon80@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vito Nixon at (727) 226 - 3229
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FL
JAN 13 2011 5:50

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

PrimeTime Tires LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
DIVISION OF STATE
REGISTRATION
10 MAY 13 PM 11:58

The Articles of Organization for this Limited Liability Company were filed on 1/30/2015 and assigned
Florida document number L15000018196.

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**) _____

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: _____

3011 US-ALT 19

Enter Florida street address

Palm Harbor

City

Florida

34683

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	Thomas Chao Rodriguez Browning	1277 Bayshore Blvd Dunedin, FL 34698	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated Nov. 8th. 2018

Vol. 72

Signature of a member or authorized representative of a member

Vito Nixon

Typed or printed name of signee