## L15000035951

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TAN 20 2015

## **COVER LETTER**

Division of Cor			
Empire Det	ailing		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
	Cesar Villegas		
		Name of Person	<u> </u>
		rathe of Telson	
	Empire Detailing		
		Firm/Company	
	310 NW 76th Ave		
		Address	
	Pembroke Pines/FL 33024		
	info@empiredetailing.co	City/State and Zip Code	SECRETARY 19
	E-mail address: (	to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Gloria Delgado		786 2021471 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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)
MAII	JNG ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tailahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Empire Detailing LLC		
( <u>Name of the Limited Liat</u> (A Flor	oility Company as it now appears on our re ida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability	Company were filed on 01/12/2016	and assigned
Florida document number L15000035951	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET AD)	DRESS)	
		2016 SEC
		And
Enter new mailing address, if applicable:		Sold -
(Mailing address MAY BE A POST OFFICE BOX)		me n m
		ZΞ ω
B. If amending the registered agent and/or registered agent and/or the new registered office ac		ords, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
		, 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>	Address	Type of Action
MGR	Gloria Delgado	310 NW 76th Ave	Add
		Pembroke Pines, FL 33024	☐ Remove
			Change
MGR	Cesar Villegas	310 NW 76th Ave	<b>a</b> Add
		Pembroke Pines, FL 33024	Remove
			☐ Change
<del></del>			
			□ Remove
			Change  Change  Change  Add  Add
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			Remove
			☐ Change

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Dated,		
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Typed or printed name of signee

Filing Fee: \$25.00