

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

4500038293

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : RC TAX SERVICE LLC  
Account Number : I20140000083  
Phone : (407)932-0040  
Fax Number : (407)520-5473

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BOBBY'S APPLIANCE REPAIR LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 05      |
| Estimated Charge      | \$25.00 |

2022 APR -1 PM 4:10

2022 APR -1 PM 4:28

2022 APR -1 PM 4:28

APPROVED  
AND  
FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BOBBY'S APPLIANCE REPAIR 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:

JENY A DIAZ GONZALEZ

Name of Person

BOBBY'S APPLIANCE REPAIR LLC

Firm/Company

1713 BUCKEYE FALLS WAY

Address

ORLANDO, FL 32824

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JENY A DIAZ GONZALEZ

Name of Person

at ( )

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**

BOBBY'S APPLIANCE REPAIR 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 03/02/2015 and assigned  
Florida document number L15000038293.

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)

1713 BUCKEYE FALLS WAY

ORLANDO, FL 32824

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1713 BUCKEYE FALLS WAY

ORLANDO, FL 32824

**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:

JENY A DIAZ GONZALEZ

New Registered Office Address:

1713 BUCKEYE FALLS WAY

*Enter Florida street address*

ORLANDO

*City*

Florida

32824

*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.*

Jeny Diaz  
If Changing Registered Agent, Signature of New Registered Agent

2022 APR - PH 28  
FILED  
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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>                      |
|--------------|----------------------|------------------------|--|
| AMBR         | JENY A DIAZ GONZALEZ | 1713 BUCKEYE FALLS WAY | <input checked="" type="checkbox"/> Add    |
|              |                      | ORLANDO, FL 32824      | <input type="checkbox"/> Remove            |
|              |                      |                        | <input type="checkbox"/> Change            |
| MGR          | HOVEL, ROBERT J, SR  | 9432 IVYWOOD STREET    | <input type="checkbox"/> Add               |
|              |                      | CLERMONT, FL 34711     | <input checked="" type="checkbox"/> Remove |
|              |                      |                        | <input type="checkbox"/> Change            |
| MGR          | HOVEL, DIANE L       | 9432 IVYWOOD STREET    | <input type="checkbox"/> Add               |
|              |                      | CLERMONT, FL 34711     | <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               |
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|              |                      |                        | <input type="checkbox"/> Change            |
|              |                      |                        | <input type="checkbox"/> Add               |
|              |                      |                        | <input type="checkbox"/> Remove            |
|              |                      |                        | <input type="checkbox"/> Change            |

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MARCH 31 2022

JENY A DIAZ GONZALEZ

Typed or printed name of signee