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COVER LETTER

TO: Registration So Division of Con	ection rporations		
	E SERVICES, LLC		
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
	Sara Lopez		
		Name of Person	
	Lopez & Company		
		Firm/Company	
	10906 Sheldon Rd		
		Address	
	Tampa, FL 33626		
		City/State and Zip Code	
	ernest@elopezpa.com		
	E-mail address: (t	o be used for future annual report notific	cation)
For further information	concerning this matter, please ca	ill:	
Sara Lopez		813 888-8811 at ()	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	the following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 26, 2018

SARA LOPEZ LOPEZ & COMPANY 10906 SHELDON RD TAMPA, FL 33626

SUBJECT: Y&X TIRE SERVICES, LLC

Ref. Number: L15000115968

We have received your document for Y&X TIRE SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 2 is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 018A00006013

GIBAPR -5 AM II: 30
DEPARTMENT OF STATE
TALL AHASSEE, FLORING

ALL AHASSEE FIREIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Y&X TIRE SERVICES, LLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our r Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 07/06/2015	and assigned
Florida document number L15000115968	_•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
FLASH TIRE SERVICES, LLC		
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRI	ESS)	75 P.3
		Par II
Enton nove mailing address if applicables		20 mare
Enter new mailing address, if applicable:		(A)
Mailing address MAY BE A POST OFFICE BOX)		
		50° 50°
		5 %
B. If amending the registered agent and/or registe	ered office address on our re	cords, enter the name of the ne
registered agent and/or the new registered office addr	ess nere:	
Name of New Registered Agent:		
New Registered Office Address:		
TOW REGISTER STREET REGISTER.	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 Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
		·	□ Remove
			Change
			□ Add
			Remove
	1		Change
			□ Add
			□ Remove
			Change
			Remove
			Change
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			Remove

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fective	date, if other than the date of filing: (optional) ive 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 605.0
<u>te:</u> II	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
cumen	's effective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie Oth day after the record is filed.
1116 3	,
1	03/21/18
ted	Miles .
	Signature of member or authorized representative of a member
	YUSNIEL OLIVA SANTANA
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00