

(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



400292867194

12/05/16--01045--015 \*\*25.00

2016 DEC -5 P 12: 32
SECRETARY OF STATE
TAIL AHASSEE, FLORID

D. BRUCE DEC 07 2016

## **COVER LETTER**

TO: Registration S Division of Co		
GARAGE SUBJECT:	KINGS LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all corresp	ondence concerning this matter to the following:	
	JONATHAN WALKER	
	Name of Person	
	GARAGE KINGS LLC	
	Firm/Company	
	400 PAISLEY PLACE	
	Address	· · · · · · · · · · · · · · · · · · ·
	SAINT JOHNS/FLORIDA 32259	
	City/State and Zip Code	
	CONTACT@GARAGEKINGS.COM	
	E-mail address: (to be used for future annual report n	otification)
For further information	concerning this matter, please call:	
JONATHAN WALKE	R 904 200-2131	2018 SEC.
Name		ime Telephone Number A
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)	Certificate of Status & Certificate opy (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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GARAGE KINGS LLC		
(Name of the Limited L (A F	lability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabil	lity Company were filed on 08/24/2015	and assigned
Florida document number L15000144802	·	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
	to the second	20 20
B. If amending the registered agent and/or registered agent and/or the new registered office	- <i>-</i>	neer the name of the nev
1 to a section with the section of t		
Name of New Registered Agent:		n × √
		F <sub>C</sub>
New Registered Office Address:	Enter Florida street address	
	ל כ	> 150
-	, Florid	aZip 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
AMBR	DANIEL WESSON	221 MORGAN RANCH CIRCLE	🗆 Add
		BONAIRE, GEORGIA 31005	■ Remove
			Change
			Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
<del></del>			
			Remove
		TAL	Change
		AH AS S	CHESTAR - 5 C Remove
		E. F.CO	OF SIKIE
		A	Ω Add
			Remove
			□ Change

•				
• •				
				· · · · · · · · · · · · · · · · · · ·
ective date, if other than the da	te of filing:		(options	
effective date is listed, the date must be te: If the date inserted in this block	specific and cannot be prior	to date of filing or more t able statutory filing re	than 90 days after fili quirements, this de	rig.) Kamisuant to 605.0 Rew COPnot be likted
ument's effective date on the Depar	rtment of State's records.		A	
			SE	5 Y
record specifies a delayed e	ffective date, but no	t an effective time	e, at 12:01 and	on the earlier
he 90th day after the record	i is filed.		, LOS	
			22. 22.	a
DECEMBER 01	2016	·	<b>&gt;</b>	1/3
	. /			
Smaths	mull			
		orized representative of a	member	

Page 3 of 3

Filing Fee: \$25.00