# 15000202876

(Re	equestor's Name)	
(Ac	ddress) .	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bı	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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2016 JAN -8 PM 4: 30

K.SALY EXAMINER JAN 11

## **COVER LETTER**

то:	Registration Division of	n Section Corporations		
CHDI		Mobile Truck & Trailer Repair LLC		
SUDI	JECT:	Name of Limited Liability Company		
The e	nclosed Articles	of Amendment and fee(s) are submitted for filing.		
Please	e return all corre	spondence concerning this matter to the following:		
		Kimberly A Doup		
		Name of Person		
		Amelia Mobile Truck & Trailer Repair LLC		
		Firm/Company		
96134 Somerset Dr Apt# 804				
		Address		
		Fernandina Beach, Florida 32034		
		City/State and Zip Code		
		kdoup@yahoo.com		
		E-mail address: (to be used for future annual report notification)		
For fu	orther informatio	on concerning this matter, please call:		
Kimb	erly A Doup	419 565-5116 at ( )		
	Nan	ne of Person Area Code Daytime Telephone Number		
Enclo	sed is a check for	or the following amount:		
<b>■</b> \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

2016 JAN-8 PM 4:31

TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12-2-2015 and assigned Florida document number L15000202876

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 "LLC."

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:

Enter Florida street address

### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

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>	Type of Action
MGR	Kimberly A Doup	96134 Somerset Dr #804 Fernandir	■ Add
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effective dat e: If the da	, if other than the date of filing:e is listed, the date must be specific and cannot te inserted in this block does not meet the ective date on the Department of State's	ne applicable statutory filir	(optiona nore than 90 days after filing requirements, this day	ng.) Pursuant to 605.0207
	ecifies a delayed effective date, ay after the record is filed.	but not an effective	time, at 12:01 a.m	on the earlier of
ed/	<u>z - 30, z</u>	015		
	Signature of a member	Z Z Z	of a member	
	organitie of a memor	admorized representative	w mwmbw	

Page 3 of 3

Filing Fee: \$25.00