## L16 0000 9101 f

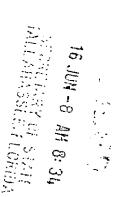
(F	Requestor's Name)
(A	Address)
(F	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Document Number)
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## **COVER LETTER**

	gistration Se vision of Cor			
SUBJECT:		Mobile Detailing, LLC		
	-	Name of Limi	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Jonathan Westberry		
		<del></del>	Name of Person	,
		LuxeTouch Mobile Detaili	ng, LLC	
			Firm/Company	<del></del>
		PO Box 5109	•	
			Address	
		Winter Park, FL 32793		
			City/State and Zip Code	<del></del>
		jcwestberry@luxetou.ch	to be used for future annual report notifi	cation)
For further	information c	oncerning this matter, please or	-	
Jonathan W			407 865-0522 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	ne 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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LuxeTouch Mobile Detailing, LLC	
( <u>Name of the Limited</u> (A	Liability Company as it now appears on our records. Florida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number L16000091018	oility Company were filed on this 10th day of May, 2016 and assigned and assigned
This amendment is submitted to amend the follow	ring:
A. If amending name, enter the new name of the	he limited liability company here:
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
	registered office address on our records, enter the name of the new
registered agent and/or the new registered office	ce address here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City :> Zin 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	Jonathan Westberry	PO Box 5109	Add
		Winter Park, FL 32793	□ Remove
			Change
AMBR	Sarah Wynn	11623 Pineloch Loop	■ Add
		Clermont, FL 34711	Remove
			Change
	. <del>.</del>		Addi
			Remove
			Change
			Add
			□ Remove
			☐ Change
<del>-\</del>			□ Add
		<del></del>	□ Remove
			□ Change
		·	Add
	·		□ Remove
			☐ Change

Detailing, LLC, as Manage	er (MGR) in the LLC's Articles of Organiz	ration in order to meet account eligibility
requirements of First Green	n Bank's business checking account. Addi	tionally, I have added Sarah Wynn as an
Authorized Member (AME	BR) of LuxeTouch Mobile Detailing, LLC	
		<b>参</b>
		\$3.50 <b>c</b>
		1
ctive date, if other than t	he date of filing:	(optional)
: If the date inserted in this		ling or more than 90 days after filing.) Pursuant to 6 ory filing requirements, this date will not be li
ecord specifies a delay e 90th day after the re		ctive time, at 12:01 a.m. on the ear
June 4th	2016	
	· · · · · · · · · · · · · · · · · · ·	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00