

L16000 144396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

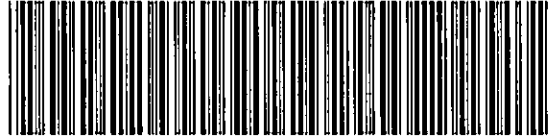
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
18 JUN 20 AM 8:47

N COOPER

JUN 21 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Liberty Capital Holdings 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:

PETER TRUNZO
Name of Person

Liberty Capital Holdings LLC
Firm Company

1037 CARRIAGE PARK DRIVE
Address

VALRICO, FLORIDA 33594
City State and Zip Code

PTRUNZO@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL FERREIRA at (941) 320-2996
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JUN 20 AM 8:47

Liberty Capital Holdings LLC

(Same 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 08/02/16 and assigned
Florida document number L16000144396

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)

1037 CARRIAGE PARK DR
VALRICO, FL 33594

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1037 CARRIAGE PARK DR
VALRICO, FL 33594

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:

PETER TRUNZO

New Registered Office Address:

1037 CARRIAGE PARK DR
Enter Florida street address

VALRICO, Florida 33594
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

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>MICHAEL FERREIRA</u>	<u>4411 BEE RIDGE RD</u>	<input type="checkbox"/> Add
		<u>177</u>	<input checked="" type="checkbox"/> Remove
		<u>SANAGOTA, FL 34233</u>	<input type="checkbox"/> Change
<u>MGRM</u>	<u>SANDRA M FERREIRA</u>	<u>4411 BEE RIDGE RD</u>	<input type="checkbox"/> Add
		<u>#177</u>	<input checked="" type="checkbox"/> Remove
		<u>SANAGOTA, FL 34233</u>	<input type="checkbox"/> Change
<u>MGRM</u>	<u>PETER TRUNZO</u>	<u>1037 CARRIAGE PARK DR</u>	<input checked="" type="checkbox"/> Add
		<u>VALDICO, FL 33594</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Handwritten signature across the lines.

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DIVISION OF CORPORATIONS
18 JUN 20 AM 8:47

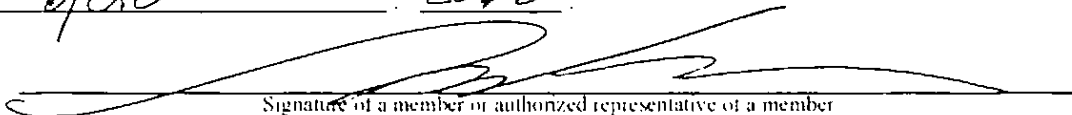
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 0207 (3)(b)

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

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 6/20 2018


Signature of a member or authorized representative of a member

MICHAEL FERREIRA
Typed or printed name of signee