# 117000000478

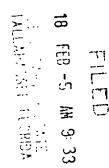
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Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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FEBOG 2018

# **COVER LETTER**

Divi	sion of Corp	orations		
SUBJECT:	ELIER AUT	O BODY LLC		
SUBJECT.		Name of Limit	ted Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed	Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return	all correspon	dence concerning this matter t	o the following:	
		DARLENE CARRILLO		
			Name of Person	
		D & M BUSINESS SERVI	CE	
			Firm/Company	
		2393 S CONGRESS AVE	SUITE 205	
			Address	
		PALM SPRINGS, FL 3340	06	
			City/State and Zip Code	
		darlenec@dmbusinessservic		<del></del>
		E-mail address: (to	o be used for future annual report notific	ation)
For further in	formation co	ncerning this matter, please ca	II:	
DARLENE			561 969-2466 at () Area Code Daytime 3	
	Name of l	Person	Area Code Daytime 3	felephone Number
Enclosed is a	check for the	following amount:		
\$25.00 F	iling 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

TO:

Registration Section

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

ELIER AUTO BODY LLC			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Liability Company)		
he Articles of Organization for this Limited Liability Company	were filed on 12/30/2016	and assigned	
lorida document number L1700000478			
nis amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liab	ility company here:		
CT REMODELING & IMPROVEMENTS LLC			
ne new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."	
nter new principal offices address, if applicable:	318 LAKE ARBOR DR		
Principal office address MUST BE A STREET ADDRESS)	PALM SPRINGS, FL 33461		
		· ½: 🕏	
nter new mailing address, if applicable:	318 LAKE ARBOR DR	E833	
Auiling address MAY BE A POST OFFICE BOX)	PALM SPRINGS, FL 33461	111 O L	
and the same and t	·	当、東で	
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her		ည်း ယ တြင်း ယ enter the name of the r	
	±'		
Name of New Registered Agent:			
New Registered Office Address:	<u> </u>		
	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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ELIER CANIZARES	318 LAKE ARBOR R	Add
		PALM SPRINGS, FL 33461	Remove
			Change
			Remove
			□ Change
			☐ Add
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cam	(optional) not be prior to date of filing or more than 90 days after filing.) Pursuant to 60 the applicable statutory filing requirements, this date will not be liss records.	05.0207 ( sted as t
e record specifies a delayed effective date The 90th day after the record is filed.	, but not an effective time, at 12:01 a.m. on the earl	lier of:
ated JANUARY 16	318	
Signature of a mem	per or authorized representative of a member	
C ELIER CANIZARES		

Page 3 of 3

Filing Fee: \$25.00