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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Finest Auto Detailing South Florida 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:
Miguel Moran Name of Person
Firest Auto Detailing South Florida LLC Firm/Ompany 1979 N.E. 180th St Address
1979 N.E. 180th St
North Miani Beach, FL. 33162 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Miguel Moran at (305) 731 - 1904
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$60.00 Filing Fec, Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$60.00 Filing Fec, 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

Fixest Auto Detail	ING South Florida LLC
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L17000003524</u> .	vere filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit Enter new principal offices address, if applicable:	y Company," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	TALL SE
Enter new mailing address, if applicable:	FEB 21
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office 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 **Address Type of Action** Title **Name** Miguel Moran Horth MiAMi Beach, FL. 33/16/2 Remove ☐ Change □ Add ☐ Remove □ Change □ Remey □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove _□ Change

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Effective date If an effective date Note: If the da document's effe	e is listed, the ite inserted i	date must be in this block	e specific and k does not r	d cannot be meet the a	prior to d pplicable			an 90 days				
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Page 3 of 3

Filing Fee: \$25.00