L17000035537

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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1 12/14/2023

COVER LETTER . . .

TO: Registration Sec Division of Corp			
street legal	egacy, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Dan Winter		
		Name of Person	
	dans auto air conditioning	,llc	
		Firm/Company	
	5290 haas		
		Address	
	north port, fl 34291		
		City/State and Zip Code	
	Dan@dansautoairrepair.com E-mail address: (n to be used for future annual report noti	fication)
For further information co	oncerning this matter, please c	•	
dan winter		941 2551219	
Name of	Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for th	e 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 S	ection	Street Address: Registration Sec	

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20231.57.30 PR 5:31

street legal legacy,lic			
(Name of the Lin	nited Liability Com (A Florida Limite	pany as it now appears on our d Liability Company)	records.)
The Articles of Organization for this Limited	Liability Compar	ny were filed on febuary 14,	2017 and assigned
Florida document number L17000035537	·		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lis	ability company here:	
he new name must be distinguishable and contain the	words "Limited Lia	bility Company," the designation	t "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)		. = -
Inter new mailing address, if applicable:		5290 haas ave	
(Mailing address MAY BE A POST OFFICE BOX)		north port, fl 34291	
3. If amending the registered agent and/or gent and/or the new registered office addr	registered office ess here:	e address on our records, g	enter the name of the new regists
Name of New Registered Agent:	martin daniel	winter	
New Registered Office Address:	5290 haas avo		
		Enter Florida street	address
	north port	- ···	_, Florida ³⁴²⁹¹
		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	james e white	5647 taneytown street	□Add
		north port, fl	
		34291	Change
ambr	isreal colon	5647 taneytown street	□ Ad d
		north port, fl	■Remove
		34291	Change
ambr	martin daniel winter	5290 haas ave	≣ Add
		north port. fl	□Remove
		34291	Change
			□Add
			□Remove
			□Change
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an effe <u>lote:</u> l	re date, if other than to entire date is listed, the date in f the date inserted in this not's effective date on the	nust be specific an block does not t	d cannot be prior meet the applica	to date of filing or able statutory fili	more than 00 days of	otional) der filing.) Pursuant to his date will not be	o 605.0207 e listed as
recor is fae	specifies a delayed effec d.	tive date, but no	t an effective tit	ne, at 12:01 a.m	on the earlier of:	(b) The 90th day	after the
ated _	ovember 19	1	. 2023	<u>.</u>			
	Dec	Signature of a	member or autho	rized representativ	e of a member	<u>. </u>	_

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Filing Fee: \$25.00