

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

4700004754

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614) 280-3336  
Fax Number : (954) 208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MERRILL ROAD CAR WASH, LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 04      |
| Estimated Charge      | \$55.00 |

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M. SOLOMON

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Merrill Road Car Wash, LLC

(Name 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 February 24, 2017 and assigned  
Florida document number 117000044754.

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9200 Merrill Rd.

Jacksonville FL 32225

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9200 Merrill Rd.

Jacksonville FL 32225

**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:

C T Corporation System

New Registered Office Address:

1200 South Pine Island Road

Enter Florida street address

Plantation

City

Florida 33324

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.



Olga Hinkel, VP

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>                      |
|--------------|------------------------------|-------------------------------|--------------------------------------------|
| AMBR         | Express Wash Operations, LLC | c/o A&M Capital Opportunities | <input checked="" type="checkbox"/> Add    |
|              |                              | 1 Pickwick Plaza, Third Floor | <input type="checkbox"/> Remove            |
|              |                              | Greenwich, CT 06830           | <input type="checkbox"/> Change            |
| MGR          | Frank O Bennett              | 150 Town Village Drive        | <input type="checkbox"/> Add               |
|              |                              | Cary, NC 27513                | <input checked="" type="checkbox"/> Remove |
|              |                              |                               | <input type="checkbox"/> Change            |
| MGR          | Brooks Moye                  | 150 Town Village Drive        | <input type="checkbox"/> Add               |
|              |                              | Cary, NC 27513                | <input checked="" type="checkbox"/> Remove |
|              |                              |                               | <input type="checkbox"/> Change            |
|              |                              |                               | <input type="checkbox"/> Add               |
|              |                              |                               | <input type="checkbox"/> Remove            |
|              |                              |                               | <input type="checkbox"/> Change            |
|              |                              |                               | <input type="checkbox"/> Add               |
|              |                              |                               | <input type="checkbox"/> Remove            |
|              |                              |                               | <input type="checkbox"/> Change            |
|              |                              |                               | <input type="checkbox"/> Add               |
|              |                              |                               | <input type="checkbox"/> Remove            |
|              |                              |                               | <input type="checkbox"/> Change            |

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

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**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,

**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 December 22, 2020 \_\_\_\_\_.

## Scare Eggs

Signature of a member or authorized representative of a member

Sean Epps - President and authorized representative of the member Express Wash Operations, LLC.

Typed or printed name of signee

**Filing Fee: \$25.00**