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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070000160

Phone

: (800)494-3124

: (305)675-2811 Fax Number

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 PREMIER ONE AUTO DETAILING LLC

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Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

DIVISION OF CONTRACTORS AH 10: 36

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ARTICLES OF AMENDMENT 1.1700189562-3 TO ARTICLES OF ORGANIZATION

PREMIER	ONE AUTO I	DETAILING LLC				
(Name of the Limited Liz (A Flo	hility Company anda Limited En	as it now appears of ibility Company)	n our records.)			
The Articles of Organization for this Limited Liabilit	y Company w	vere filed on	04/12/2017	and assigned		
Florida document numberL17000082653				1 1		
This amendment is submitted to amend the following	. .			Wislow of		
A. If amending name, enter the new name of the	limited liabil	ity company ber	<u>:</u>	DIVISION OF COMPANIO: 36		
The new name must be distinguishable and contain the words	Limited Liabilit	y Company," the des	ignation "LLC" or the abb	reviation "L.L."		
Enter new principal offices address, if applicable	6621 OAKWOOD BILLS COURT			<u>့</u> ပ		
(Principal office address MUST BE A STREET AL		NEW PORT RICHEY, FLORIDA 34655				
		N				
Enter new mailing address, if applicable:		9631 OAKWOOD HILLS COURT				
(Mailing address MAY BE A POST OFFICE BOX	ত	NEW PORT RIC	HEY, FLORIDA 3465	5		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of address here	lice address on	our records, <u>enter</u>	the name of the new		
Name of New Registered Agent:	AMES BEND	ER		 · · ·		
New Registered Office Address:	9631 OAKWOOD HILLS COURT					
Now Agains a different and a second	Enter Florida street address					
3	NEW PORT KI	ICHEY	Florida _34	655		
-	 ,	City:		Zip Code		
New Registered Agent's Signature, if changing Regi	stered 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

Page 1 of 3

4.17000189562.3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	THOMAS WILSON	PO BOX 1758	
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Page 2 of 3

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THE 90th	t day after the reco	,		,			
ated	JULY 19TH	<u></u>	2017	.			
-		_//_,	1. // A				
_		Signature of a me	mber or authoriz	zed representative u	of a member		"
		,	JAMES BE	NDER			
			yped or printed	• •			 -
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4.17000189562-3