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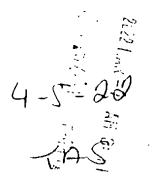
(Requestor's Name)	
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(Document Number)	
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COVER LETTER

Registration Section

Division of Corporations

TO:

GUERRER SUBJECT:	O TIRES SERVICES LLC		
30000CT.	Name of Lin	nited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	OSBEL GUERRERO BE	FANCOURT	
		Name of Person	
	GUERRERO TIRE SERV	TCES .LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	835 301 BLVD E		
		Address	
	BRADENTON .FL 34203		
	_	City/State and Zip Code	
	GUERREROTIRESERVIC		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
OSBEL GUERRERO BI	ETANCOURT	941 243-5174 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S	_	<u>Street Address:</u> Registration Se	ection
Division of C	orporations	Division of Co	
P.O. Box 632		The Centre of	
Tallahassee, I	-L 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Co</u> (A Florida Lim	impany as it now appears on our rec ited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L17000096998</u> .	pany were filed on $\frac{05/02/2017}{}$	and assigned
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 I	Liability Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	835 301 BLVD E , BRADE	ENTON , FL 34203.
(Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable:		27.22 1.
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, <u>en</u>	ter the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

CHERRED TREE SERVICES 110

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 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>	Type of Action
			□Remove
			□Change
			□Add
			⊒Remove
			□Change
.			Add
			F. 570
			A Departe
			CO Add
			□Remove
			□Change
			□Remove
			□Change
			□Add

_____ □Change

BECAUSE I CAN NOT DO IT ONLINE. I'M READY TO PAY THI	E FEE FOR THIS SERVICES.
	-
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	£122
	# U.2 22 22
	$\frac{1}{2}$
rective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing te: If the date inserted in this block does not meet the applicable statutor cument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, at 12:01 is filed.	La.m. on the earlier of: (b) The 90th day after
ted FEBRUARY 28 (2022)	
ted	

Typed or printed name of signee