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COVER LETTER

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erm rezer.		GARAGE LLC		
SUBJECT:	·	Name of Lim	ited Liability Company	-
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ondence concerning this matter	to the following:	
		CARLA ARANTES		
			Name of Person	
			Firm/Company	
		729 BUTTONWOOD LAI	NE	
ADD	RESS.	BOYNTON BOYTON BOYTON BOYTON	Address	
		CARANGS@FAU.EDU	Chy/State and Zip Code CARANTES @ to be used for future annual report no	FAU. EDU
		E-mail address: (to be used for future annual report no	otification)
For further	information c	oncerning this matter, please ca	all:	
CARLA AI	RANTES		561 886-7720 at (
	Name o	f Person	Area Code Dayti	me 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)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COUI Registration Sec Division of Corp Clifton Building 2661 Executive (Tallahassee, FL	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FREDDY'S GARAGE LLC		
{Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 05/10/2017 Florida document number L17000103810		and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		7 66
(Principal office address MUST BE A STREET AD	DRESS)	DEC DEC
-		79 - 1,73 = 1
		2 796
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Annual water to the state of th		(*)
B. If amending the registered agent and/or re registered agent and/or the new registered office a		iter the name of the new
Name of New Registered Agent:		·
New Registered Office Address:	Enter Florida street address	
	121	
	, Florida , Florida	a 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
MGR	CARLA ARANTES		
		1603 West Copans Road, 9 Pompano Beach, FL.	Remove
			Change
MGR	FREDDY ALTAMIRANO	1603 West lopans Roma Pompano Beach, FL.	d, 9-10 ■ Add
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ctive date, if other than the d effective date is listed, the date must b	be specific and cannot b		g or more than 90 days a		
 If the date inserted in this bloc ment's effective date on the Dep 			filing requirements,	this date will not	be listed
ecord specifies a delayed		ut not an effect	ive time, at 12:0	1 a.m. on the	earlier
e 90th day after the reco	rd is filed.				
NOVEMBER 3	2947	1			
u /		//- '			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00