# KI7 (CCC 171878

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## **COVER LETTER**

TO:	Registration Se Division of Cor			
	SUBZERO	FLORIDA REPAIR, LLC		
SUBJE	ECT:			
		Name of Limited Liability Company		
The end	closed Articles of	f Amendment and fee(s) are submitted for filing.		
Please	return all correspo	ondence concerning this matter to the following:		
		Vanessa Guardia		
		Name of Person		
		SUBZERO FLORIDA REPAIR, LLC		
		Firm/Company		
		7520 NW 104th Ave Svite 103	<b>2021</b> SEC	
		Address		77
		Doral, Florida 33178	JUL 26 PM	ILED
		City/State and Zip Code	유 골	111
		vguaddia07@hotmoil.com	21A	U
		E-mail address: (to be used for future annual report notification)	H N	
		concerning this matter, please call:		
vanessa	a Guardia	786 5465799		
	Name o	of Person Area Code Daytime Telephone Number	<del></del>	
Enclose	ed is a check for th	the following amount:		
<b>■ \$2</b> :	5.00 Filing Fee	(additional copy is enclosed) Certified	e of Status	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

pany as it now appears on our records.) d Liability Company)
ny were filed on and assigned
ability company here:
bility Company," the designation "LLC" or the abbreviation "L.L.C."
N/A
SEC 51.60
JUL 26 PL ATTARY 0
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e address on our records, enter the name of the new registe
Enter Florida street address
, Florida
n a

### 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 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>	Name	Address	Type of Action
	N/A		□Add
			□Remove
			□ Change
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						<u></u>
		Date of Filing		<del></del>	,	
Effective date, if other than f an effective date is listed, the date			CCU	(optional	)	
Note: If the date inserted in the document's effective date on the	is block does not mee	t the applicable s	tatutory filing requ	in 90 days after film irements, this dat	g.) Pursuar e will not	to 605.0207 (3 be listed as th
record specifies a delayed effe d is filed.	ective date, but not an	effective time, a	t 12:01 a.m. on the	earlier of: (b) T	he 90th d	ay after the
July 20th	2	2021				
Dated	, ,					