## 117000176229

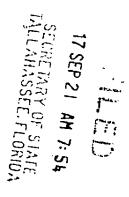
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PICK-UP WAIT	MAIL
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## **COVER LETTER**

TO:	Registration Sec Division of Corp		
end in		REPAIR, LLC	
SUBJE		Name	of Limited Liability Company
The end	closed Articles of A	Amendment and fee(s)	are submitted for filing.
Please	return all correspor	idence concerning this	matter to the following:
		SEYEDAFSHIN RI	  AZIMAND
			Name of Person
		CELL FIX & REPA	
			Firm/Company
		1863 WELLS RD. 2	APT 13B li ! Address
		ORANGE PARK, F	
		OKANOLI AKK, I	City/State and Zip Code
		supsvc0702@yahoo.	
		E-mail ad	dress: (to be used for future annual report notification)
For fur	ther information co	ncerning this matter, pl	lëase call:
SEYE	DAFSHIN RIAZIN	1AND	904 609-5111 at ()
	Name of	Person	Area Code Daytime Telephone Number
Enclose	ed is a check for the	e following amount:	
\$25	5.00 Filing Fee	□ \$30.00 Filing Fee Certificate of Sta	
	Registra Divisior P.O. Bo	NG ADDRESS: tion Section to of Corporations to 6327 (see, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CELL FIX & REPAIR, LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
e Articles of Organization for this Limited Liability Company were filed on and assigned rida document number L17000176229
s amendment is submitted to amend the following:
If amending name, enter the new name of the limited liability company here:
new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."
ter new principal offices address, if applicable:
incipal office address MUST BE A STREET ADDRESS)
<del>-</del>
ter new mailing address, if applicable:
ailing address MAY BE A POST OFFICE BOX)
If amending the registered agent and/or registered office address on our records, enter the name of the distered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:  Enter Florida street address  Enter Florida street address
Florida F
City Code
w Registered Agent's Signature, if changing Registered Agent:
ereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with a visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and expt the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ng filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability appany has been notified in writing of this change.

Page 1 of 3

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	СЕМ ВАЅАК	9727 TOUCHTON RD APT 2010	Add
		JACKSONVILLE FL 32246	■ Remove
			Change
MGR		1863 WELLS RD APT 13B	Add
<del></del>		ORANGE PARK FL 32073	□ Remove
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			☐ Remove
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			Add
			Remove
	1	·	Change

amending any other information.	enter change(s) here: (Attach additional sheets, if n	necessary.)
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fective date, if other than the date	of filing:(of pecificant cannot be prior to date of filing or more than 90 days a	ptional)
in effective date is listed, the date must be s ote: If the date inserted in this block of	pecificand cannot be prior to date of filing or more than 90 days a loes not meet the applicable statutory filing requirements,	ifter filing.) Pursuant to 605.020 this date will not be listed a
cument's effective date on the Depart	ment of State's records.	
record specifies a delayed eff The 90th day after the record	ective date, but not an effective time, at 12:0 is filed.	1 a.m. on the earlier
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SEPTEMBER 14	2017	
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Sign	ature of a member or authorized representative of a member	
SEYEDAFSHIN RIAZIMA	ND G	
	Typed or printed name of signee	
	Page 3 of 3	