L18000029599





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02/21/19--01007--016 **25.00



R. WHITE FEB 2 6 203

COVER LETTER

TO:	Registration Se Division of Cor		• •	•
SUBJE		SERVICES LLC		
SUBJI	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		ANAS ZABEN		
		AW TIRE SERVICES LLC	Name of Person	
		607 South Pine Ave	Firm/Company	
		Ocala, FL 34471	Address	
		 	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information c	oncerning this matter, please ca	all:	
<i> </i> -	Anas Tab Name o	e n f Person	at (<u>107</u>) 267 Area Code Daytime	0666 Telephone Number
Enclos	ed is a check for th	ne following amount:		
\$2:	5.00 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)

MAILING ADDRESS:

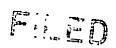
TO:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, 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



AW TIRE SERVICES LLC		2019 FEB 21 PM 2: 46
(Name of the Limited I	iability Company as it now appears or	our records.)
	.iability Company as it now appears or Florida Limited Liability Company)	IALLAND SEE WIE
The Articles of Organization for this Limited Liabi	lity Company were filed on $\frac{02/01}{}$	2018 and assigne
Florida document number L18000029599		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company" the design	nation "LLC" or the abbreviation "LLC"
The new little man of distinguishable that contain the world	S Zimitod Statiniy Osmpaly, and demig	
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	•	ur records, enter the name of the
		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	street address
		, Florida
-	Citv	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 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 beir or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Ac
MGR	AŁI AL ABDALLY	3812 Mount Vernon Way Kissimmee, FL 34741	∃ Add
		<u> </u>	Remove
			□ Change
			□ Remove
			Change
	 -		Add
			Remove
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			Remove
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			Remove
			Change

		
		
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	st be specific and cannot be prior to date of filing or more the lock does not meet the applicable statutory filing rec	
ne record specifies a delaye The 90th day after the re	d effective date, but not an effective time cord is filed.	e, at 12:01 a.m. on the earlier
February 7	2019	
	77	
- June	Signature of a member or authorized representative of a	member
ANAS ZABEN		
	Typed or printed name of signee	

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Filing Fee: \$25.00