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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

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_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS:

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 079233 8178853 AUTHORIZATION COST LIMIT ORDER DATE: February 21, 2018 ORDER TIME : 3:46 PM ORDER NO. : 079233-005 CUSTOMER NO: 8178853 DOMESTIC AMENDMENT FILING NAME: WF AUTO DETAILING, LLC EFFECTIVE DATE: XXX ARTICLES OF AMENDMENT ____ RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY

COVER LETTER

TO:

Registration Section

Division of Car	rporations	٠.	•
SUBJECT: WF AUTO	DETAILING, LLC		
Bondard X.	Name of Lin	nited Liability Company	
		•	•
	• • • •		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
,	-		
	JEAN POLYNICE		
•		Name of Person	
•	•		
	· · · · · · · · · · · · · · · · · · ·	****	
		Firm/Company	•
	931 NW. 145 TERRACE		
		Address	
	MIAMI, FL 33168		
,		City/State and Zip Code	
	jeanpolynice212@yahoo.co		·
. •	E-mail address: (to be used for future annual rep	ort notification).
For further information c	oncerning this matter, please ca	ali:	
JEAN POLYNICE		786_3	16-2885
<u>-</u>		at ()	
Name o	f Person	Area Code	Daytime Telephone Number
	·.	•	·
Enclosed is a check for th	te following amount:		•
	7	-	
☐ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Statu
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		·.	• •
MAILI	ING ADDRESS:	STREET/C	OURIER ADDRESS:
Registr	ation Section	Registration	Section
	n of Corporations	Division of	
P.O. Bo	sece, FL 32314	Clifton Build	ling ive Center Circle
TOTAL		Tallahassee,	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WF AUTO DETAILING, LLC	•	•
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
T. A. C. L. C.	02/21/2018	
The Articles of Organization for this Limited Liability Company	were filed on Observation	and assigned
lorida document number L18000046921	•	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
	:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company " the designation "LTC"	or the abbreviation "L.L.C."
The second secon	2.00	
Enter new principal offices address, if applicable:	931 NW. 145 TERRACE	<u> </u>
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33168	
		#m >>
		1027
	931 NW. 145 TERRACE	යි. න]
nter new mailing address, if applicable:	****	
Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33168	3 40
		**
If amending the registered agent and/or registered of egistered agent and/or the new registered office address her		enter the name of the r
		•
Name of New Registered Agent:		
Trains of 140% 16081910164 Akent.		
New Registered Office Address:		
	Enter Florida street address	
	Flori	da ·
	City	Zip Code
	,	

If Changing Registered Agent, Signature of New Registered Agent

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
AMBR	JEAN POLYNICB	931 NW. 145 TERRACE	Add
		MIAMI, FL 33168	□ Remove
			☐ Change
AMBR	FABOLON SAINT LOUIS	931 NW. 145 TERRACE	
		MIAMI, FL 33168	Remove
			🖬 Change
· · · · · · · · · · · · · · · · · · ·		·	Add
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ffective of the intent so	date inserted in this bloo effective date on the Dep specifies a delayed	be specific and cannot be prior ck does not meet the applic partment of State's records effective date, but no	to date of filing or more than 90 cable statutory filing requirer	ents, this date will not be li
90th	day after the reco	rd is filed.		
1(23-08-	2018		Z 2
		JEST		
	Ş	ignature of a member or auth	orized representative of a member	A
	EAN POLYNICE	•		<u> </u>
11		T	nd name of size of	
 11		Typed or print	ed name of signee	
 II		,	ed name of signee	