## L18000156101

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

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## **COVER LETTER**

TO: Registration S Division of Co			
Smokeys C	igar, LLC		
r	Name of Lir	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are suf	bmitted for filing.	
Please return all correspo	ondence concerning this matter	r to the following:	
	John W. Parker III		
		Name of Person	
	Jose's AutoCure		
	-	Firm/Company	
	14733 N. Florida Ave		
		Address	
	Tampa, FL 33613		
		City/State and Zip Code	
	john@josesautocare.com		
For further information c	E-mail address: ( concerning this matter, please c	(to be used for future annual report noti call:	(fication)
John W. Parker III		813 969-3778 at ()	
Name o	t Person	Area Code Daytim	e 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)
<u>Mailing Addres</u> Registration S		Street Address:	
Division of C		Registration Sec Division of Cor	
P.O. Box 632	7	The Centre of T	
Tallahassee, I	L 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Smokeys Cigar, LLC			
(Name of the Limit	ed Liability Comp: (A Florida Limited	my as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Li Florida document number <u>L18000156101</u>	iability Company	were filed on 06/26/2018	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liab	oility company here:	
Jose's AutoCare, LLC			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applic	able:	14733 N. Florida Ave	
Principal office address MUST BE A STREE		Tampa, FL 33613	
Enter new mailing address, if applicable:		14733 N. Florida Ave.	
Mailing address MAY BE A POST OFFICE .	<u>BOX)</u>	Tampa, FL 33613	
3. If amending the registered agent and/or regent and/or the new registered office address	egistered office : is here:	address on our records, enter the nam	e of the new register
Name of New Registered Agent:	John W. Parker	111	^
New Registered Office Address:	14733 N. Floric	la Ave	- <del>-</del> -
		Enter Flovida street address	 
	Tampa		ري 613 <sup>يي</sup>

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.

City

If Changing Registered Agent Signature of New Registered Agent

Zip Code

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

Title	Name	Address	Type of Action
Manager	Dwaine A. Parker	272 Burnt Pine Dr	□Add
		Naples, FL 34119	■Remove
Managing John W. Parker III	John W. Parker III	14733 N. Florida Ave	
		Tampa, F1, 33613	⊡Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Add
		□Remove	
			□Change
		□ Add	
			□Remove
			□Change

	N A
flec	tive date if other than the date of filing:
an ef	tive date, if other than the date of filing: (optional)  [Testive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020.
ore:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	•
reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Listi	iled
ated	September 8 2021
	Signature of a member of authorized representative of a member
	/ /

THE CONTRACTOR