118000235078

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T SCHROEDER

COVER LETTER

TO: Registration Section Division of Corporation		`	
SUBJECT: Touc	rs by Bracks		
	Name of Limit	ed Liability Company	
The enclosed Articles ofme	endment and fee(s) are subn	nitted for filing.	
Please return all corresponde	nce concerning this matter to	o the following:	
	Steve	Brooks Name of Person	
	Trucks be	Brock S Firm/Company	
		_	
	200 NW 174h	Address	
	Pompano F	Seach FL, 3306 City/State and Zip Code Costs Octobal Costs o be used for future annual report notifica	9
-	Trucksbyb E-mail address (to	o be used for future annual report notifica	ntion)
For further information conce	erning this matter, please ca	11:	
Steve Br	rson	at (<u>417</u>) <u>298</u> - Area Code Daytime T	elephone Number
Enclosed is a check for the fo	ollowing 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)

MAILING ADDRESS:

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

Trucks by Brooks LL	C		
(<u>Name of the Limited Liabil</u> (A Florid	a Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability (Florida document number <u>上1880035078</u>		0/04/2018	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the de	esignation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		<u>4,</u>	
(Principal office address MUST BE A STREET ADD	RESS)		0
		·· .	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		37 th	<u>ა</u>
B. If amending the registered agent and/or regi registered agent and/or the new registered office add		our records, enter the	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	
		, Florida	
	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) on for this Limited Liability Company were filed on 10/04/2018 and assigned 188000335078. ted to amend the following: ter the new name of the limited liability company here: ishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." tes address, if applicable: WUST BE A STREET ADDRESS) gistered agent and/or registered office address on our records, enter the name of the he new registered office address here: Office Address: Enter Florida street address Enter Florida street address	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 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 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>	<u>Address</u>	Type of Action
MGR	Steve Brooks	200 NW 1746 Ave, Po	npens Brah FI (Add) 33069
			□ Remove
			Change
AMBR	Patricia M Brooks		
		200 NW 17th Ave, Pom	pano Becch Flid Remove 33069
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			Remove 2. Change
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document's effectiv	e date on the Depar	rtment of State	's records.						
e record specif The 90th day	ies a delayed e after the record	ffective date I is filed.	e, but not a	an effectiv	e time, at	12:01 a	a.m. on	the e	arlier
Dated				. •					
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Page 3 of 3

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