L19000132923

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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
	AUTO DETAILING LLĊ	•	
SOBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Piease return all correspo	ondence concerning this matter	to the following:	
	GENAR	О МОЛСА	
		Name of Person	
		Firm/Company	
		8176 100TH CT	
		Address	
	VE	City/State and Zip Code	
	MOJICASAUTODETAILE	•	Lation V
For further information (concerning this matter, please ca	·	ication)
GENARO MOJICA		772 388-7398	
Name e	of Person		: Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address:	otion.
Division of (Registration Sec Division of Corp	
P.O. Box 632	-	The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOJICA'S AUTO DETAILING LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number 1.19000032923	·		· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the fo	llowing:		and assigned	
A. If amending name, enter the new name	of the limited liab	oility company her	•	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the de	signation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	icable:	8176 100TH CT		
(Principal office address MUST BE A STREET ADDRE		VERO BEACH, FL 32967		
Enter new mailing address, if applicable:		8176 100TH CT		
(Mailing address MAY BE A POST OFFICE	E BOX)	VERO BEACH, FL 32967		
D. Hamandina de la	registered office	address on our re	cords, enter the name of the new register	
b. It amending the registered agent and/or agent and/or the new registered office addr	ess here:			
B. If amending the registered agent and/or agent and/or the new registered office addragent and/or the new Registered Agent:	ess here:	, <u>-</u>		
agent and/or the new registered office addr	ess here: 			
agent and/or the new registered office addr Name of New Registered Agent:	ess here:	T	la street address	
agent and/or the new registered office addr Name of New Registered Agent:	ess here:	T Enter Florid	da street address , Florida 32967	
agent and/or the new registered office addr Name of New Registered Agent:	ess here: 8176 100TH C VERO BEACI	T Enter Florid I City		

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

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
			□Add
			□Remove
			□Change
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fecti	ive date, if other than the date of filing:
ote.	if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
ocum	ent's effective date on the Department of State's records.
is fil	d 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
ated	3-66-2010 Signature of a member or authorized representative of a member
	Lucy White
	Signature of a member or authorized representative of a promber