

L19000110033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

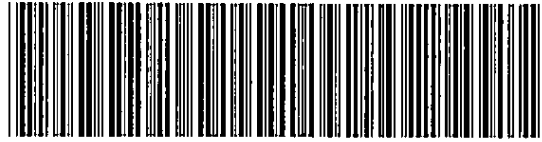
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED

JUN 17 2019

PAID
2019 JUL -5 PM 12:32

JUL 9 2019

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Jorge Does It Right LLC

DOCUMENT NUMBER: L19000110033

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kimberly Reyes
(Name of Contact Person)

(Firm/ Company)

5635 Marion County Rd.
(Address)

Lady Lake, FL. 32159
(City/ State and Zip Code)

reyesjkam@hotmail.com
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Reyes at 352-516-3734
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2019

KIMBERLY REYES
5635 MARION COUNTY RD
LADY LAKE, FL 32159

SUBJECT: JORGE DOES IT RIGHT LLC
Ref. Number: L19000110033

We have received your document for JORGE DOES IT RIGHT LLC and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

This is a LLC the document you sent in is for a Corporation.

* Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned. *

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 119A00012969

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2019 JUL -5 PM 12:01
STATE OF FLORIDA
TALLAHASSEE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Jorge Does It Right LLC

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

FILED
2019 JUL -5 P 12: 42

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number L19000110033.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Budget Fleet Services, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: NA

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: NA

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Kimberly Reyes

New Registered Office Address: NA

Enter Florida street address

Florida

City

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.

Kimberly Reyes

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>	<u>Type of Action</u>
N/A			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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