

U9000112317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

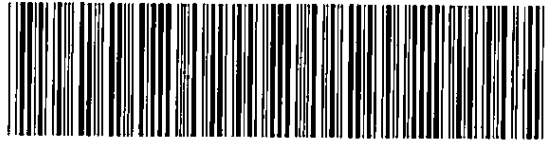
(Business Entity Name)

(Document Number)

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07/11/24--01040--006 **25.00

2012 JUL 11 AM 11:27

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 21ST CENTURY MOTOR COMPANY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

J. Garry Rooney

Name of Person

Rooney & Rooney, P.A.

Firm/Company

1517 20th Street

Address

Vero Beach, FL 32960

City/State and Zip Code

attorneys@rooneyandrooneylaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

J. Garry Rooney

772 778-5400
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

21ST CENTURY MOTOR COMPANY LLC

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

The Articles of Organization for this Limited Liability Company were filed on 04/24/2019 and assigned
Florida document number L19000112317.

This amendment is submitted to amend the following:

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

Machine-Fi Equipment Group 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:

No change

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

No change

(Mailing address MAY BE A POST OFFICE BOX)

2019 JUL 11 AM 11:27

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:

No change

New Registered Office Address:

Enter Florida street address

City, Florida

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Item	Category	Quantity	Unit	Location	Notes
1	Food	10	kg	Store A	Add
2	Food	5	kg	Store B	Remove
3	Food	15	kg	Store C	Change
4	Food	8	kg	Store A	Add
5	Food	12	kg	Store B	Remove
6	Food	7	kg	Store C	Change
7	Food	9	kg	Store A	Add
8	Food	11	kg	Store B	Remove
9	Food	6	kg	Store C	Change
10	Food	13	kg	Store A	Add
11	Food	4	kg	Store B	Remove
12	Food	16	kg	Store C	Change
13	Food	10	kg	Store A	Add
14	Food	5	kg	Store B	Remove
15	Food	15	kg	Store C	Change

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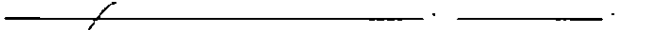
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[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 21, 2024

June 21, 2024



Signature of a member or authorized representative of a member

Lynn Shepard

Typed or printed name of signee

Filing Fee: \$25.00