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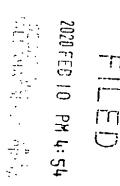
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COVER LETTER

TO: Registration Se Division of Cor						
ORLANDO	ORLANDO AUTO BODYSHOP ELC					
SUBJECT: Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	HERMAN SINGH					
		Name of Person	· · · · · · · · · · · · · · · · · · ·			
	HERMAN SINGIL & ASS	OCIATES INC				
		Firm/Company				
	600 RINEHART RD SUIT	TE 2008				
		Address				
	LAKE MARY, FL 32746					
		City/State and Zip Code				
	SHERRY HSTAXES@GN					
		to be used for future annual report not	infreation)			
For further information c	concerning this matter, please c	all:				
HERMAN SINGH		407 831-1399				
Name v	of Person	at () Area Code Daytir	ne Telephone Number			
Enclosed is a check for t	he following unrount:					
S25.00 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 Addre</u> Registration		<u>Street Address:</u> Registration So	ection			
Division of C		Division of Ce	orporations			
P.O. Box 631		The Centre of 2415 N. Monre				
Tallahassee.		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

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

1	.)	
ARTICLES OF O	RGANIZATION	
O	F	
ORLANDO AUTO BODYSHOP LLC		多るで
(Name of the Limited Liability Compar	iv as it now appears on our record	
(A Florida Limited L	(apinty Company)	F.
The Articles of Organization for this Limited Liability Company	were filed on 7/18/2019	and assigned of
Florida document number 1.19000185234		
Florida document number		
This amendment is submitted to amend the following:		
60 8 9 11 12	tia	
A. If amending name, enter the new name of the limited liabi	nty company nere:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company." the designation "LLC	or the abbreviation "L.L.C.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Termedyn Office when the second of the secon		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a	ddress on our records, <u>ente</u> r	r the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
-		
New Registered Office Address:	Enter Florida street addre	288
		lorida
	City	z.ip c oac
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. Thereby 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>N</u> ame	<u>Address</u>	Type of Action
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		ORLANDO, FL 32817	
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