## L 2000000 1683

| (Req                      | uestor's Name)  |             |
|---------------------------|-----------------|-------------|
| bbA)                      | ress)           |             |
| (A.1.1                    |                 |             |
| obA)                      | ress)           |             |
| (City                     | /State/Zip/Phon | e #)        |
| PICK-UP                   | MAIT            | MAJL        |
| (Bus                      | iness Entity Na | me)         |
| (Doc                      | ument Number)   | )           |
| Certified Copies          | Certificate     | s of Status |
| Special Instructions to F | iling Officer:  |             |
|                           |                 |             |
|                           |                 |             |
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|                           |                 |             |

Office Use Only



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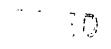
C. GOLDEN FEB 1 2 2020

## **COVER LETTER**

| TO: Registration Sec<br>Division of Corp |   |  |  |
|--|---|--|--|
| A & G Mob                                | ile Auto Repair LLC                               |  |  |
| SUBJECT:                                 | Name of Limi                                      | led Liability Company                              |  |
|  |   |  |  |
| The enclosed Articles of                 | Amendment and fee(s) are sub-                     | nitted for filing.                                 |  |
| Please return all correspon              | ndence concerning this matter t                   | o the following:                                   |  |
|  | Adriel Gonzalez Luis                              |  |  |
|  |   | Name of Person                                     | · <del></del>  |
|  | A & G Mobile Auto Repa                            |  |  |
|  | ·   | Lum/Company  |  |
|  | 1158 Navajo Ave                                   |  |  |
|  |   | Address  |  |
|  | Lehigh Acres. FL 33936                            |  |  |
|  |   | City State and Zip Code                            |  |
|  | gonzalezadriel1987@gm                             | ail.com<br>to be used for future annual report not | (fication)   |
| For further information c                | oncerning this matter, please of                  |  |  |
| Adriel Gonzalez Luis                     | ·   | 239 745-1837                                       |  |
| Name o                                   | i Person  | at ()  | ne Telephone Number  |
|  |   |  |  |
| Enclosed is a check for t                |   | [] \$55,00 Filing Fee &                            | ☐ \$60.00 Filing Fee.  |
| ≅ \$25.00 Filing Fee                     | (7) \$30,00 Filing Fee &<br>Certificate of Status | Certified Copy (additional copy is enclosed)       | Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|  |   |  |  |
| Mailing Addre<br>Registration            |   | <u>Street Address:</u><br>Registration Se          | ection   |
| Division of C                            |   | Division of Co                                     | rporations   |
| P.O. Box 63.                             | 27  | The Centre of                                      | Tallahassee<br>oe Street, Suite 810  |
| Tallahassee.                             | F1, 32314   | 2413 (S. MION)                                     | or sincer since one  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT` TO ARTICLES OF ORGANIZATION OF



2020 JAT 13 PH 12: 19

A & G Mobile Auto Repair 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 01/01/2020  | and assigned                                    |
|--|---|---|
| Florida document number L20000001683   |   |   |
| This amendment is submitted to amend the following:  |   |   |
| A. If amending name, enter the new name of the limited liab  | oility company here:  |   |
| The new name must be distinguishable and contain the words "Limited Liabi  | lity Company," the designation "LLC" or the                             | ne abbreviation "L.L.C."                        |
| Enter new principal offices address, if applicable:  | 1158 Navajo Ave   |   |
| (Principal office address MUST BE A STREET ADDRESS)  | Lehigh Acres. FL 33936  |   |
| Enter new mailing address, if applicable:  | 1158 Navajo Ave   |   |
| (Mailing address MAY BE A POST OFFICE BOX)   | Lehigh Acres, FL 33936  | <del></del>                                     |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:   | address on our records, <u>enter the r</u>                              | name of the new registered                      |
| New Registered Office Address:   | Enter Florada street address  |   |
|  |   |   |
|  | , Florida   | Zijr Code                                       |
| New Registered Agent's Signature, if changing Registered Agent:  | <u> </u>  |   |
| I hereby accept the appointment as registered agent and agr<br>provisions of all statutes relative to the proper and complete<br>accept the obligations of my position as registered agent as p<br>being filed to merely reflect a change in the registered office<br>company has been notified in writing of this change. | r performance of my dutics, and Le<br>provided for in Chapter 605, F.S. | un familiar with and<br>Or, if this document is |

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>  | Name | Address | Type of Action |
|---------------|------|---------|----------------|
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| fan effectiv<br>Note: If th |                       | te must be specific an<br>his block does not | d cannot be prior to<br>meet the applicab |                                       | (optional)<br>han 90 days after filing.) I<br>quirements, this date w |                    |
| aszeument :                 |                       |  |   |                                       |   |                    |
|                             | ecifies a delayed eff | fective date, but no                         | ot an effective time                      | e, at 12:01 a.m. on t                 | ne earlier of: (b) The  | 90th day after the |
| e record sp                 | uary 7th              | fective date, but no                         | 2020                                      | e, at 12:01 a.m. on th                | ne earlier of: (b) The  | 90th day after the |
| e record spord is filed.    | ·                     |  | 2020                                      | e, at 12:01 a.m. on the               |   | 90th day after the |

Filing Fee: \$25.00