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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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2022 APR 11 PM 5: 52
SECRETARY OF STATE



RECEIVED

2022 APR 11 PM 12: 32

SECRETARY OF STATE TALLAHASSEE, FL

March 25, 2022

SINDY VERITUS 4326 SEVEN CANYONS DR KISSIMMEE, FL 34746

SUBJECT: KING'S MOBILE CAR WASH LLC

Ref. Number: L20000014988

We have received your document for KING'S MOBILE CAR WASH LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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

Querida R Silas Regulatory Specialist II

Letter Number: 522A00007082

www.sunbiz.org

COVERCETTER

| | gistration Se vision of Cor | | | |
|---------------|--------------------------------|--|---|--|
| CUDIECT. | | ile Car Wash | | |
| SUBJECT: | | Name of Lim | ited Liability Company | |
| The enclose | d Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return | n all correspo | ondence concerning this matter | to the following: | |
| | | Sindy Veritus | | |
| | | | Name of Person | |
| | | | Firm/Company | |
| | | 4530 S. Orange Blossom T | | |
| | | Orlando, FL 32839 | Address | |
| | | | City/State and Zip Code | |
| | | Info@kingsmobilecw.net | | |
| For further i | information c | E-mail address: (oncerning this matter, please c | to be used for future annual report not | ification) |
| Sindy Verit | us | | 407 795-4729 at () | |
| | Name o | f Person | | e Telephone Number |
| Enclosed is | a check for th | ne 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) |
| Re | niling Addres egistration S | Section | <u>Street Address:</u> Registration Se | ction |
| | vision of C O. Box 632 | orporations 7 | Division of Cor The Centre of 1 | |
| | llahassee, I | | | e Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION ED **OF**

2022 APR 11 PM 5: 52

| King's Mobile Car Wash LLC | | 4452 N. H. (1 H. O. | |
|---|------------------------------|--|---------------------------|
| (Name of the Limited Liabi | lity Compan la Limited Li | v as it now apple ORE TWRESONS ST ability Company TALL AHASSEE. I | ATE Fl |
| he Articles of Organization for this Limited Liability lorida document number 120000014988 | Company ' | were filed on <u>01/08/2020</u> | and assigned |
| his amendment is submitted to amend the following: | | | |
| a. If amending name, enter the new name of the li | mited liab | lity company here: | |
| The new name must be distinguishable and contain the words "LEnter new principal offices address, if applicable: **Principal office address MUST BE A STREET AD.** | imited Liabil | | 8 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1 | 4530 S. Orange Blossom Trail #6 Orlando, FL 32839 | 88 |
| B. If amending the registered agent and/or registored agent and/or the new registered office address here | ered office <u>re</u> : | address on our records, enter th | e name of the new registe |
| Name of New Registered Agent: | 330 S. ORA | NGE BLOSSOM TRAIL #688 | |
| New Registered Office Address: | | Enter Florida street address | |
| 0 | rlando | , Flor | rida 32839 |

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.

City

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 |
|--------------|----------------|-----------------------------------|----------------|
| AMBR | Sindy, Veritus | 4530 S. Orange Blossom Trail #688 | |
| | | Orlando, FL 32839 | |
| MGR | Kenson, Joseph | 4757 N Pine Hills | |
| | | Orlando, FL 32808 | |
| MGR | Nicky, Charles | 7117 Willowwood St | |
| - | ,, | Orlando, FL 32818 | ■Add |
| | | | □Remove |
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| fective date, if other than the date of filing: (optional) (opti | | |
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| fective date, if other than the date of filing: (optional) neffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 teg. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as cument's effective date on the Department of State's records. ecord 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 is filed. | | |
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