120000033734

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COVER LETTER

Div	ision of Cor	porations		
CHDIECT.	Tuxedo Ca	ar Cleaning LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Leonard Titone MBA, Cl	PA	
			Name of Person	
		CPA Tax Advisors Inc		
			Firm/Company	
		12995 S Cleveland Aver	nue Suite 210	
			Address	
		Fort Myers, FL 33907		
			City/State and Zip Code	
		admin@cpataxadvisors I E-mail address: (nc to be used for future annual report	notification)
For further in	nformation c	oncerning this matter, please c	all:	
Leonard Tit	one		855 740-10	40
	Name o	f Person	at () Area Code Da	tytime Telephone Number
Enclosed is a	i check for tl	ne following amount:		
≅ \$25.00 F	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)
	iling Addres		<u>Street Addres</u> Registration	
		Corporations	<u> </u>	Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

Tuxedo Car Cleaning LLC	ZL??)*** 23 PH 4: 5
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L20000033734	were filed on 1/28/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2975 Ribbon Court
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, FL 33907
Enter new mailing address, if applicable:	2975 Ribbon Court
(Mailing address MAY BE A POST OFFICE BOX)	Fort Myers, FL 33907
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	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 agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. 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>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			[] Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
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Effective date, if other the fan effective date is listed, the case. If the date inserted in document's effective date or	late must be specific a this block does not	nd cannot be prior to meet the applica	o date of filing or more ble statutory filing r	(optional than 90 days after filin equirements, this dat	g.) Pursuant to 605,0207 (
record specifies a delayed of is filed.	effective date, but no	ot an effective tin	ne, at 12:01 a.m. on	the earlier of: (b) T	The 90th day after the
		2020			
Dated March 4		_ 1	- '		
Dated March 4	Summer of	Color and	ized representative of	a member	

Filing Fee: \$25.00