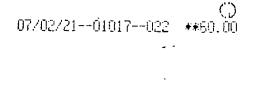


(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	y J. C.

07/23/27







COVER LETTER

TO: Registration Section Div <u>i</u> sion of Corporati	ons			
SUBJECT: PCWC	house M	ictors LLC		
	Name of Limit	ted Liability Company		
The enclosed Articles of Amend	iment and fee(s) are sub-	nitted for filing.		
Please return all correspondence	concerning this matter t	o the following:		
	Jennis (Castille		
. -	Pawerhe	Name of Person See Michael Se	LLC	
		Firm/Company		
<u>/</u>	200 Sw	14th CT #3	23	
F	rt Laud	erdaless FL 3	33315	
	Dennis Cust	City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code Co		
For further information concern)*!• •!>
Dennis Ca	4;//o	m. 860 964	-5135	
Name of Perso	n		e Telephone Number	
			4.7 2.7	
Enclosed is a check for the folk	owing amount:		200	
☐ \$25.00 Filing Fee ☐ :	\$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of State Certified Copy (additional copy is enc	
Mailing Address:		Street Address:		
Registration Section	n	Registration Se	ction	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Powerhold Motor Limited Liability Company as it now appears on our records.)

Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent as registered agent as registered agent.		, Florida	Zip Cod	
				de
	Enter Florida su	veet address	24	
			20	
Name of New Registered Agent:		_ .	Ts. s	
			2001 2002 2003	
B. If amending the registered agent and/or regis agent and/or the new registered office address had		ds, <u>enter the nam</u>	e of the	new registered
(Maining address MAT DE ATOST OFFICE DO.	<u></u>			()
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.				
(Principal office address MUST BE A STREET A	(DDRESS)		·	
Enter new principal offices address, if applicable	e:			
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designa	ation "LLC" or the ab	breviation	"L.L.C."
A. If amending name, enter the new name of the	e limited liability company here:			
This amendment is submitted to amend the following	ng:			
Troffida document manoct	<u>705</u>			
Florida document number L L C S	lity Company were filed on	11-24	\bigcirc and	assigned
The Articles of Organization for this Limited Liabil	`~-			

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
MBR	Ahmed, Samy D	496 Haverhill Commune	<u></u>
	, in the second	Circle Apt 28	XRemove
		West Palm Beach 1-633	∐_Change
			□Remove
			□Change
			□Add
			DRemove
			□Change
			□Add
			□Remove
			∴ □ Change
			_
			□Remove □Change
			∟∟∪nange

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
Samy D Ahmad 15 NOI	
Fighterized to make any changes	
and is Removed immediately from	
	- Ins
	<u> </u>
Under Pawerhors MCTG/S L'LC	_
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	- ز <u>ر</u>
F. Effective date if other than the date of filing: (optional)	· · · · · · · · · · · · · · · · · · ·
(If an effective 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	fter the
record is filed.	
Dated (0/30/2)	
Signature of a member of authorized representative of a member	
1 Jennis Lastillo	
Typed or printed name of signed	

