LZO 000109260

(Re	questor's Name)	
(Ād	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Name Change

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COVER LETTER

	gistration Secti ision of Corpo				
SUBJECT:	Payless Auto	Glass, LLC			
SUBJECT.		Name of Lim	ited Liability Company		
The enclosed	d Articles of Ar	nendment and fee(s) are sub	mitted for filing.		
Please returr	all correspond	ence concerning this matter	to the following:		
		Angela Minefee			
			Name of Person		
		Law 4 Small Business, P.C			
			Firm/Company		
		320 Gold Ave SW, STE 62	20		
			Address		
		Albuquerque, NM 87102			
			City/State and Zip Code		s s
		FILINGS@L4SB.COM			ECER ISHEN
F 6 b			to be used for future annual report notific	ration)	SECRETARY OF PH 2:
For Iurther ii	niormation con	cerning this matter, please ca	3H:		の 1912 1912
Angela Min	efee		505 715-5700 at ()		PH S
	Name of P	erson		Telephone Number	72 7
Enclosed is :	a check for the	following amount:			
≡ \$25.00 I	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 Sta Certified Copy (additional copy is er	itus &
<u>Ma</u>	iling Address:		Street Address:		

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PAYLESS AUTO GLASS, LLC	
(<u>Name of the Limited Liability Company as it</u> (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were	filed on and assigned
Florida document number 1.20000109260	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
RiteTech Auto Glass, LLC	
The new name must be distinguishable and contain the words "Limited Liability Cor	npany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>
(Principal office address MUST BE A STREET ADDRESS)	22 75
	# 22E
	
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Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	<u>~ 20</u>
	<u>a</u> 35
	:
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	ss on our records, enter the name of the new register
Name of New Registered Agent:	100
New Registered Office Address:	
	Enter Florida street address
	. Florida
	ity Zip Code

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.

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
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effective date is listed, the date	the date of filing:	or to date of filing or more		
	s block does not meet the app e Department of State's record		quirements, this date will r	iot be listed
ord specifies a delayed effectived.	ctive date, but not an effective	time, at 12:01 a.m. on t	he earlier of: (b) The 90th	i day after th
med.				
d	2020	·		
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Typed or printed name of signee