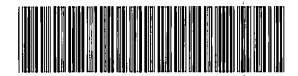
## L20000343616

(Requesto	or's Name)
(Address)	
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Docume)	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:





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APR () 2 2021

## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 04/01/2021		**WALK IN**
ENTITY NAME 1BEAT1	MOVE AUTO GLASS LLC	
DOCUMENT NUMBER_		
	**PLEASE FILE THE ATTACHED AND RETURN**	
XXXX	Plain Copy	**WALK IN**
	Certified Copy	
	Certificate of Status	•
****	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**  Certified Copy of Arts & Amendments	
	Certificate of Good Standing	** {*   w
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINATI		_
NUMBER OF CERTIFICAT	ES REQUESTED	_
TOTAL OWED \$25.00	ACCOUNT #: I20160000072	
Please call Tina at the	e above number for any issues or concerns. Thank you so i	much!

## **COVER LETTER**

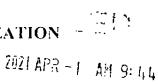
TO:	Registration Se Division of Cor			
/>> 1 a s a a		e Auto Glass LLC		
SOBJI	ECT:	Name of Lin	ited Liability Company	<u>.</u>
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		LEANA GUZMAN		
			Name of Person	<del></del>
		ZENBUSINESS PBC		
			Firm/Company	
		5900 BALCONES DR ST	E 5000	
		··	Address	
		AUSTIN, TX 78731		
		FULFILLMENT@ZENBU	City/State and Zip Code ISINESS.COM	
		E-mail address: (	to be used for future annual report notifi	ication)
For fur	ther information c	oncerning this matter, please c	all:	
LEAN	a guzman		844 493-6249 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
<b>⊜</b> \$2:	5.00 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



IbeatImove Auto Glass LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

bility Company were filed on 08/11/2020	and assigned
·	
ving:	
the limited liability company here:	
rds "Limited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
ble:	
ADDRESS)	
<u></u>	<del>-</del>
r registered office address on our recor ce address here:	ds, enter the name of the new
Enter Florida street addr	ess
, I	lorida Zip Code
•	Zip Code
gistered Agent:	•
	ting:  the limited liability company here:  ds "Limited Liability Company," the designation "LI  ole:  ADDRESS)  registered office address on our recorder address here:  Enter Florida street address

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 2021 APR - 1 AH 9: 4 LType of Action <u>Address</u> **Title** Name Lucien Rezuma 3821 NW 21st Street **AMBR** Apt 307 Lauderdale Lakes, FL 33311 \_\_\_\_ Remove □'Remove!!!' : ☐ Change \_□ Add ☐ Remove \_\_\_\_ □ Change \_\_\_\_\_ □ Rembve \_\_ 🗆 Change \_\_□ Add ☐ Remove ☐ Change ⊟ Kaa 1 □ Remove

\_\_\_\_ Change

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ective date lif other the	an the date of filing:	(0	ntional)
effective date is listed, the d	an the date of filing:	to date of filing or more than 90 days :	after filing.) Pursuant to 605.0.
	this block does not meet the applicate the Department of State's records		this date will not be listed
	,		1
record specifies a de	elayed effective date, but no	ot an effective time, at 12:0	1 a.m. on the earlier
he 90th day after th			
March 31	2021	·	
/s/ Antwan Go	oss JR	orized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00