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COVER LETTER

TO:

TO: Registration S Division of Co			
	WHEELS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	TRAVIS W. WILLIAMSO)N	203
		Name of Person	2020 SEP 1
		Firm Company	PH 2: 05
	PO BOX 25		72:1
	·	Address	
	MANGO, FL 33550		
	ROBERT@WELLENCPA.		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report notif all:	(cation)
TRAVIS W. WILLIAM	SON	813 305-9023	
Name of Person			· Telephone Number
Enclosed is a check for (he following amount:		
■ \$25.00 Filing Fee	S30.00 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 Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of To 2415 N. Monroo Tallahassee, FL	porations allahassee c Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Lia</u> (A Flo	ability Company as it no orida Limited Lubility C	ow appears on our ompany)	records.)	-	
The Articles of Organization for this Limited Liabili				_	_ and assigned
Florida document number L20000255913					
This amendment is submitted to amend the following	ā:				
A. If amending name, enter the new name of the	limited liability com	npany here:	1	~ 3	
PALMER WHEELS LLC			<u> </u>	2020	
The new name must be distinguishable and contain the words	Limited Liability Compa	my." the designatio	n "LLC" or	the abbro	viation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			73 (7) (7) (7)		
			ŗn :	₽	
				ΐ	*
				30	
Enter new mailing address, if applicable:	N/A				
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>			
			_		
B. If amending the registered agent and/or regist agent and/or th <u>e new registered office address he</u>		on our records,	enter the	name (of the new reg
agent and/or the new registered office address he	<u> </u>				
Name of New Registered Agent: N/	/A	 			
New Registered Office Address:					
	Enter Florida street address				
			, Florid	la	
-	City		 ·		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 for removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u> <u>Name</u> <u>Address</u>	Type of Action
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·	□Change
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