

L20 000263522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

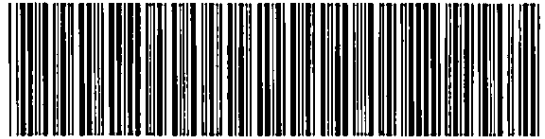
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09/22/20--01006--027 **60.00

DEPARTMENT OF REVENUE
OFFICE OF BUSINESS REGISTRATION
101 MARKET STREET, 10TH FLOOR
COLUMBIA, SC 29201

2020 NOV -9 PM 3:03

FILED

NOV 10 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 OCT 29 2:15

October 29, 2020

WESLY JEAN
1907 N HAVERHILL ROAD APT 10
WEST PALM BEACH, FL 33417

SUBJECT: CWAP EXPRESS TECH AND ACCESSORIES LIMITED LIABILITY
COMPANY
Ref. Number: L20000263522

We have received your document for CWAP EXPRESS TECH AND ACCESSORIES LIMITED LIABILITY COMPANY and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia S Young
Regulatory Specialist II

Letter Number: 120A00021634

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CWAP EXPRESS TECH AND ACCESSORIES
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WESLY JEAN

Name of Person

Firm/Company

1907N HAVERHILL RD APT 10

Address

WEST PALM BEACH FL 33417

City/State and Zip Code

JEANWESLEY6@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WESLY JEAN

561

5745931

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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 Address:

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**

CWAP EXPRESS TECH AND ACCESSORIES

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

The Articles of Organization for this Limited Liability Company were filed on AUGUST 25

Florida document number L20000263522

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BEST RESERVE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1907 N HAVERHILL RD APT 10

WEST PALM BEACH FL 33417

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1907 N HAVERHILL RD APT 10

WEST PALM BEACH FL 33417

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 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 Changing Registered Agent, Signature of New Registered Agent

FILED
2008 NOV - 19
PM 3:03
CLERK OF CIRCUIT COURT
13th JUDICIAL CIRCUIT
IN AND FOR THE STATE OF FLORIDA
TALLAHASSEE

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

[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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 605.0207 (3)(b)

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 after the record is filed.

Dated 11-06-2020, 1A7

Signature of a member or authorized representative of a member

Wesley Jean
Typed or printed name of signer