## L20000305589

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodineit Number)
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## **COVER LETTER**

	Registration Se Division of Cor									
SUBJEC		CLASS AUTO LLC								
SOBJEC	.1:	Name of Lim	ited Liability Company							
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.							
Please re	turn all correspo	indence concerning this matter	to the following:							
		RICARDO AVELLANED	9A							
			Name of Person							
		WORKING CLASS AUT	O LLC							
			Firm/Company							
		1145 E ROSE ST								
		Address								
		LAKELAND, FL 33801								
			City/State and Zip Code	<del></del>						
		WORKINGCLASSAUTO(	•							
For furth	er information c	e-mail address: (	to be used for future annual report notif	ication)						
	OO AVELLANI		863 397-2963							
-		f Person	at ()	e Telephone Number						
			,	•						
Enclosed	is a check for th	ne following amount:								
\$25.0	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		Street Address: Registration Sec	ction							
	Division of C	Corporations	Division of Corp	porations						
	P.O. Box 632 Tallahassee, 1		The Centre of T	allahassee e Street, Suite 810						

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WORKING CLASS AUTO LLC

( <u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records.)  d Liability Company)					
The Articles of Organization for this Limited Liability Comparation for this Limited Liability Comparation document number <u>L20000305589</u> .	ny were filed on SEPTEMBER 28, 2020	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited li	ability company here:					
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the a	abbreviation "L.L.C."				
Enter new principal offices address, if applicable:						
Principal office address MUST BE A STREET ADDRESS)						
		F11				
Enter new mailing address, if applicable:						
Mailing address MAY BE A POST OFFICE BOX)		- <del>- </del> <del>- </del> <del>- </del> <del>- </del>				
3. If amending the registered agent and/or registered offic gent and/or the new registered office address here:  Name of New Registered Agent:	e address on our records, <u>enter the nai</u>	ne of the new register				
New Projectored Office Address						
New Registered Office Address:	Enter Florida street address					
	, Florida					
	City	Zip Code				
lew Registered Agent's Signature, if changing Registered Agen	nt:					
hereby accept the appointment as registered agent and ag rovisions of all statutes relative to the proper and comple ccept the obligations of my position as registered agent a eing filed to merely reflect a change in the registered offic ompany has been notified in writing of this change,	te performance of my duties, and I am s provided for in Chapter 605, F.S. Or	familiar with and ; if this document is				
If Ch	nanging Registered Agent, Signature of New R	egistered 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>	<u>Name</u>	Address	Type of Action
AMBR	RICARDO AVELLANEDA	1347 BRAMBLEWOOD DR	■Ađd
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Filing Fee: \$25.00