120000343613

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COVER LETTER

TO: Registration Se Division of Cor				
	STARTERS & ALTERNATOR	RS LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	LUIS NARVAEZ			
		Name of Person		
	AGUILA STARTERS &	ALTERNATORS LL	C	
		Firm/Company		
	9421 S ORANGE BLOSS	OM TRAIL STE 11		
		Address		
	ORLANDO, FL 32837			
	ANABELLET@GMAIL.C	City/State and Zip C	ode	
	-		nual report notification)	
For further information of	oncerning this matter, please c	ali:		
LUIS NARVAEZ		407 at (930-7382	·
Name o	of Person	Area Code	Daytime Telepho	one Number 👸
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing I Certified Cop tadditional copy i	y	S60.00 Filing Fee. Certificate of Status & Certified Copy: (additional copy is enclosed)
<u>Mailing Addres</u> Registration			et Address: istration Section	
Division of Corporations		Division of Corporations The Centre of Tallahassee		
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AGUILA STARTERS AND ALTERNATORS LLC (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 C Florida document number <u>L20000343613</u>	Company were filed on 10-29-2020	and assi	igned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the ab	breviation "L.	L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	RESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	d office address on our records, <u>enter the nam</u>	e of the new	r registere
New Registered Office Address:		<u></u>	,
	Enter Florida street address	0/ 1	
	, Florida		· · · · ·
New Registered Agent's Signature, if changing Registered	City d Agent:	Dip Code :	<u> </u>
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and cacept the obligations of my position as registered agent being filed to merely reflect a change in the registere company has been notified in writing of this change.	and agree to act in this capacity. I further ag omplete performance of my duties, and I am j gent as provided for in Chapter 605, F.S. Or,	familiar with if this docu	h and ment is
	If Changing Registered Agent, Signature of New Re-	gistered Agent	1

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	LIVETTE TEJEDA	1476 AVLEIGH CIRCLE	≣ Add
	,	ORLANDO, FL 32824	□Remove
			□Change
			🗀 Add
			Remove
			☐ Change
			Remove
			Change
			□Remove
			_ _ \Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (05/27/2021 (optional) (optional) (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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.

nted MAY 27	. 2021	
and hour		
0	Signature of a member or authorized representative of a member	
LUIS NARVAEZ		
	Typed or printed name of signee	