Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MAS INSURANCE & ACCOUNTING LLC Account Number : I20170C00039

Fhone : (407)3C1-2659 Fax Number : (407)846-0320

**Enter the email address for this business entity to be used for future if annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN Y & Y AUTO DETAILING LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Y & Y Auto Detailing LLC			
(Name of the Limit	ed Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Li Florida document number L20000350073	iability Company were filed on 11/	09/2020 and assi	gned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name o	f the limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the de-	esignation "LLC" or the abbreviation "L.l	C."
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREE	TADDRESS)		
Enter new mailing address, if applicable:		, <u>, , , , , , , , , , , , , , , , , , </u>	2
(Malling address MAY BE A POST OFFICE	<u>BOX)</u>	(C)	2
B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office address on our r ess here:	ecords, enter the name of the nex	, -
Name of New Registered Agent:	Wilfredo Nieves Valentin	رن 	
New Registered Office Address:	1917 Westfall Dr		
	Enter Flo	rida street address	
	Orlando	, Florida 32817	
	City	ZψCode	

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 dutles, 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Wilfredo Nieves Valentin	1917 Westfall Dr	
		Orlando FL 32817	□Remove
			🛱 Change
			□Add
			□Remove
			Change
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			Remove
			Change
			DAdd
			□Remove
			□ Change
			DAdd
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Rective date, if other than the fan effective date is listed, the date manager of the date inserted in this becoment's effective date on the I	Slock does not meet the applica	to date of filing or more than 9	Michiga fills date will not be had	5.0207 ted as
record specifies a delayed effecti d is filed.	ive date, but not an effective ti	me, at 12:01 a.m. on the ca	irlier of: (b) The 90th day afte	er the
Dated November 20	2020	<u> </u>		
	Signature of a member or author			

Filing Fee: \$25.00