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COVER LETTER

TO: Registration Sec Division of Corp		>.,	•
SUBJECT: 400	e Favorite	. Car Wash	\
30b/Ec1	<u></u>	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Ahmad F	Name of Person	
	400, Fau	orite Car (1)as	h
	2546 201	N S 1 S Address	
	St. Deters	Show GF 1 32 City/State and Zip Code	5712
	Bible way	to be used for future annual report notif	COM fication)
For further information co	oncerning this matter, please ca	all:	
Ahmad F Name of	Person	at (727) 851- Area Code Daytime	7597 e Telephone Number
Enclosed is a check for the	c following amount:		
☐ \$25.00 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 S		Street Address: Registration Sec	ction
Division of Co		Division of Cor	
P.O. Box 6321	7	The Centre of T	allahassee
Tallahassee, F	L 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Your Favorite	Car Wash
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ted liability company here:
The new name must be distinguishable and contain the words "Lim	ited 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 ADDR	(ESS)
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:	d office address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
Name Danistana di Annata Cinantana if abanging Dagistana	d Agents

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address 254620th St. S	Type of Action
MGR	Ahmod Albrittan	Address 254620th 5+5 St. Petersburg, f133712	Add
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ite: If the date ins	ther than the date of f ted, the date must be specific certed in this block does reduced the date on the Department	not meet the applicable	ate of filing or more than 9 e statutory filing require	0 days after filing.) F ments, this date w	Pursuant to 605.020 ill not be listed a
ecord specifies a d is filed.	lelayed effective date, but	not an effective time.	at 12:01 a.m. on the ea	rlier of: (b) The	90th day after the
ted Decer	nber 19	2020			
_dl	nber 19 Ulcas Illa Signature	of a member or authorize	ed representative of a men	hber	