## L20000376701

| (Re   | questor's Name)    |             |
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| (Ad   | idress)            |             |
| (Cit  | y/State/Zip/Phone  | e #)        |
| (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Sta | MAIL               |             |
| (Bu   | isiness Entity Nar | me)         |
| (Do   | ocument Number)    |             |
| Certified Copies  | _ Certificates     | s of Status |
| Special Instructions to   | Filing Officer:    |             |
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## **COVER LETTER**

| TO: Registration Solution of Con |  |  |
|----------------------------------|--|--|
| MAGUSIC                          | D CARWASH LLC  |  |
| 30bdec 1                         | Name of Lin  | nited Liability Company  |
| The enclosed Articles of         | Amendment and fee(s) are sub                         | omitted for filing.  |
| Please return all correspondence | ondence concerning this matter                       | to the following:  |
|                                  | ANDRES E BERMUDEZ                                    |  |
|                                  |  | Name of Person   |
|                                  |  | Firm Company   |
|                                  | 3055 SW 128TH AVE                                    |  |
|                                  |  | Address  |
|                                  | MIRAMAR FL 33027                                     |  |
|                                  |  | City/State and Zip Code  |
|                                  | stellaber22@gmail.com                                | 2021   |
| For further information of       | e-man address: (<br>concerning this matter, please c |  |
| STELLA M BERMUDE                 | EZ   | 786 2774592 27   |
| Name o                           | of Person  | Area Code Daytime Telephone Number   |
| Enclosed is a check for t        | he following amount:                                 |  |
| □ \$25.00 Filing Fee             | ■ \$30.00 Filing Fee & Certificate of Status         | ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed) |
| Mailing Address Registration     |  | Street Address: Registration Section   |
| Division of C                    | Corporations   | Division of Corporations   |
| P.O. Box 632                     | <u> </u>   | The Centre of Tallahassee  |

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| MAGUSIO CARWASH LLC   |  |                          |
|---|--|--------------------------|
| ( <u>Name of the Limited Liability Com</u><br>(A Florida Limited                                    | pany as it now appears on our records.) I Liability Company) | <del></del>              |
| The Articles of Organization for this Limited Liability Compar Florida document number L20000376701 | y were filed on 12/01/2020                                   | and assigned             |
| This amendment is submitted to amend the following:   |  |                          |
| A. If amending name, enter the new name of the limited lia  | bility company here:   |                          |
| The new name must be distinguishable and contain the words "Limited Lial                            | oility Company," the designation "LLC" or th                 | ne abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   |  |                          |
| (Principal office address MUST BE A STREET ADDRESS)   |  |                          |
|   |  |                          |
| Enter new mailing address, if applicable:   |  |                          |
| (Mailing address MAY BE A POST OFFICE BOX)  |  |                          |
|   | <del></del>  |                          |
| B. If amending the registered agent and/or registered office  | address on our records, enter the n                          | ame of the new register  |
| agent and/or the new registered office address here:  |  |                          |
| Name of New Registered Agent:   |  | 22                       |
| New Registered Office Address:  |  |                          |
|   | Enter Florida street address                                 | 15 K                     |

## 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.

Cin

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         | STELLA M BERMUDEZ | 3055 SW 128TH AVE, MIRAMAR FL 33027 | □Add           |
|              |                   |                                     | ■Remove        |
|              |                   |                                     | □Change        |
| AMBR         | ANDRES E BERMUDEZ | 3055 SW 128TH AVE ,MIRAMAR FL 33027 | 🖸 Add          |
| AMBR         |                   |                                     | □Remove        |
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| an effect<br>ote: If | tive date is listed,<br>the date inserte | , the date must b<br>ed in this block | e specific and<br>colors not n | cannot be pri                                      | or to date of I | iling or more | than 90 day | 's after fili | og.) Pursuar | at 10 605.0 | 020 |
| ocumen               | it's effective da                        | ite on the Depa                       | rtment of S                    | tate's record                                      | is.             | ory ming re   | :чинетел    | is, inis qa   | ite will not | Oe listed   | u a |
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| record :             | specifies a dela                         | yed effective d                       | ate, but not                   | an effective                                       | time, at 12:    | 01 a.m. on 1  | he earlier  | of: (b)       | The 90th d   | av after    | the |
| is filed             | i.                                       |                                       |                                |  |                 |               |             |               |              | •           |     |
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Filing Fee: \$25.00