L210000 45813

(Re	questor's Name))
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
		8/27/21 Tm
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Office Use Only



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21 JUL 19 PH 2: 38



May 4, 2021

WENDELL HENRY 2401 NW 395TH CT OKEECHOBEE, FL 34972

SUBJECT: ISLAND GUYZ AUTO REPAIR & SALES LLC

Ref. Number: L21000045813

We have received your document for ISLAND GUYZ AUTO REPAIR & SALES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews OPS

Letter Number: 121A00009198

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Island Cruyz Auto Repair & Sales Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Wender Henry Name of Person
Island Cruyz Auto Repair and Soleis Firm/Company
2401 Niw 395th CT
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Julie and Richards Herry at (954) 393-9518 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Solution Status Solution Solut
Mailing Address: Registration Section Street Address: Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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TSland Crayz Auto Repair & Sales 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 Company were filed on 2-10-2021 and assigned Florida document number <u>L21000045813</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Julie Ann Richards - Henry

2401 Nw 395th CT

Enter Florida street address

Okceechsbee Florida 34972

City Zip Code Name of New Registered Agent: New Registered Office Address:

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

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 = M $AMBR = A$	lanager Authorized Member	A. A. Y. Commission	
<u>Title</u>	<u>Name</u>	Address 21 JUL 19 PH 2: 39	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
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	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		
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an effectiv lote: If th	date, if other than the date of filing:	
ocument'	s effective date on the Department of State's records.	
record sp Lis filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	th
ated		
	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
	July An Richards Henry Typed or printed name of signee	