

L21000053940

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

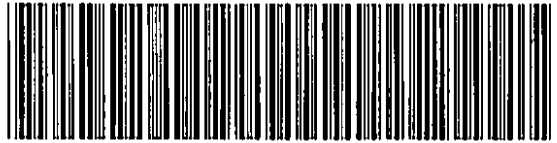
(Business Entity Name)

(Document Number)

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S.C.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RAPID SERVICE BODY SHOP, LLC

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:

YUNIOR LLANES

Name of Person

RAPID SERVICE BODY SHOP, LLC

Firm/Company

1028 SE 12th Ave

Address

Cape Coral, FL 33990

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YUNIOR LLANES

239 333-5675
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

2021 MAR 29 P 2:32

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RAPID SERVICE BODY SHOP, 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 01/29/2021 and assigned
Florida document number L21000053940.

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)

1028 SE 12th Ave

Cape Coral, FL 33990

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

154 SE 18th Ter

Cape Coral, FL 33990

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:

Name of New Registered Agent:

YUNIOR LLANES

New Registered Office Address:

154 SE 18TH TER

Enter Florida street address

Cape Coral

City

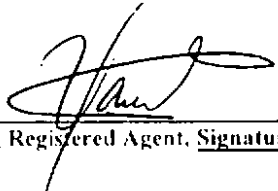
Florida

33990

Zip Code

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	YUNIOR LLANES	154 SE 18TH TER	<input checked="" type="checkbox"/> Add
		Cape Coral FL 33990	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
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MAR 29 2021

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(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)

2021 MAR 29 P 2:33
FED
Pursuant to 605.0
will not be listed
the 30th day after t

Dated 3/26/ 2021

Typed or printed name of signee