

L21 000056434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

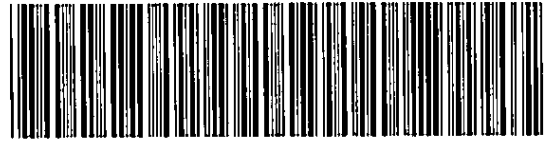
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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A handwritten signature in black ink, consisting of a large loop followed by a horizontal stroke and a vertical tail.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 11, 2022

JIMMY FAUSTIN  
P.O. BOX 256  
BRADENTON, FL 34206 US

SUBJECT: 4J'S QUALITY AUTO LLC  
Ref. Number: L21000056434

We have received your document for 4J'S QUALITY AUTO LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page one of the amendment is missing, please correct the document and fill out the required information.

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) 245-6052.

Summer Chatham  
Regulatory Specialist II

Letter Number: 622A00022740

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PAID

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 4JS Quality Auto 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:

Jimmy Faustin  
Name of Person

4JS Quality Auto LLC  
Firm/Company

P. O. Box 256  
Address

BRADENTON, Florida 34206  
City/State and Zip Code

4JS Quality Auto Llc @ Gmail. com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Jimmy Faustin at 941 580-2593  
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

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: 4J'S QUALITY AUTO 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:

JIMMY FAUSTIN

Name of Person

4J'S QUALITY AUTO LLC

Firm/Company

P O BOX 256

Address

BRADENTON, FLORIDA 34206

City/State and Zip Code

4jsqualityautollc@gmail.com

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

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FILED

For further information concerning this matter, please call:

JIMMY FAUSTIN

941

5802595

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

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**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
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**Street Address:**

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  
OF**

4J'S QUALITY AUTO 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 07/14/2022 and assigned  
Florida document number L21000056434.

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 "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)

P. O. BOX 256

BRADENTON, FLORIDA 34206

**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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_

*City*

*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

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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>
MGR	Marie Nicolle Bourdeau	4036 Willow Walk Dr Palmetto Fl 34221	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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711 E.D

E. Effective date, if other than the date of filing: 07/14/2022 (optional)

(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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 11/14/2022

Jimmy Faustin  
Signature of a member or authorized representative of a member

Jimmy Faustin  
Typed or printed name of signee