

L21 000124381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL

D BRUCE
SEP 20 2021

L30

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FR DRIVE LLC (CORRECTION OF REGISTERED AGEND NAME)

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:

MR. FERNANDO RUIZ

Name of Person

FR DRIVE LLC

Firm/Company

1281 SHAKESPEARE PL

Address

KISSIMMEE, FL, 34747

City/State and Zip Code

frdrivellc@gmail.com

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

For further information concerning this matter, please call:

MR. FERNANDO RUIZ

407 3619639
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

SECRET
TALLAHASSEE, FL

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

FR DRIVE 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 03/16/2021 and assigned
Florida document number L21000124381.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NON APPLICABLE

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)

NON APPLICABLE

NON APPLICABLE

NON APPLICABLE

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NON APPLICABLE

NON APPLICABLE

NON APPLICABLE

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:

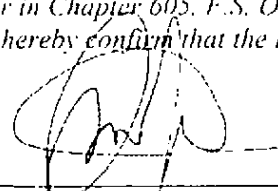
Name of New Registered Agent: MR. FERNANDO E. RUIZ Q.

New Registered Office Address: NON APPLICABLE
Enter Florida street address

NON APPLICABLE Florida NON APPLICABLE
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

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	fernando ruiz sr	1281 shakespeare pl kissimmee fl 34747 303	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
ambr	mr Fernando E Ruiz Q	1281 shakespeare pl kissimmee fl 34747	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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MASS
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2016


2021 SEP 16 AM 9:03
SECRETARY OF THE
TALLAHASSEE, FL

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2021 SEP 16 AM 9:32
SECONDARY DISPATCH
TALLAHASSEE, FL

(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)

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.

nday ,September 6th 2021



Signature of a member or authorized representative of a member

Fernando E Ruiz Q

Typed or printed name of signer

Filing Fee: \$25.00