L21000165887

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to F	Filing Officer:	
		!

t . . . t .

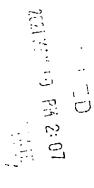
Office Use Only



500365894845

05/10/21--01048--011 **30.00

6/12/



COVER LETTER

TO: Registration S Division of Co					
SUBJECT: Un	ter wheels	nited Liability Company			
	Name of thi	uned Dabinty Company			
The enclosed Articles of	Amendment and fee(s) are sub	bmitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Jasmin	Quinones Name of Person			
	General Se	ENVICES ACCO	ounting LLC		
	7731 Jaf	Ha Dr. Address			
	Onlando	FL. 30835 City/State and Zip Code			
	19-99 @ @ Bmail address:	to be used for future annual report noti	lication)		
For further information of	oncerning this matter, please c	all:			
Yasmin Qu	UNONES of Person	at (407) 683-	7598		
Name	a reison	Area Code Daytime	e Telephone Number		
Enclosed is a check for the					
□ \$25.00 Filing Fee	S30.00 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 Addres Registration 5		Street Address:			
Division of C		Registration Sec Division of Con			
P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Under Wheels (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 Florida document number <u>L</u>21000165887 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) 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:

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 Title <u>Name</u> 7731 Jaffa Dr. Type of Action **Address** HGR General Services Accounting LC On. FL 32835 DAdd _ Remove _____ □Change MGR Amaris Quirones 7731 Jaffa Dr. Jadd ___ □Change □Remove _____ □Change ☐ □ Remove EChange

____ □Remove

						 	
			- -				
-			<u> </u>				
						-	
	<u>. </u>						
-			_				
		-			-	·	
	_					·	
							12
							5 11
.,							
	- 				<u></u>		- 2
	 .			 -			- ; - ; - ;
ctive date, if	other than the	e date of filing	g:			(optional)	
effective date is e: If the date	listed, the date mu inserted in this b	ist be specific and lock does not n	cannot be prior	r to date of filing c cable statutory f	r more than 90 day Hing requiremen	ys after filing. its, this date	Pursuant to 605.02 will not be listed
ument's effect	ive date on the [Department of S	tate's records	,			
and anaisin	n dalassad s 66°s ss'		00		1 11	0 41 h 777	00116
cora specifies : s filed.	i delayed effecti	ve date, but not	an effective t	ime, at 12:01 a.	m. on the earlier	ot: (b) Th	e 90th day after t
~ ~							
ed <u>(Y) (</u>	<u>V</u>		. <u>20</u>	<u>D</u> [
	1	nlg ~	_				
		: \					
		Signature of a	member or auth	orized representa	tive of a member		