## LZ1000 213712

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## **COVER LETTER**

TO:	Registration Se Division of Cor			•	
SE(B.11)2		A SOLUTIONS LLC			
SUBJEC	.1:				
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ru	eturn all correspo	ondence concerning this matter	to the following:		
		JESUS RODRIGUEZ JR			
			Name of Person		
			Firm/Company		
1040 ACADEMY DR Address					
			City/State and Zip Code		
		JESU2224@GMAIL.COM		<del></del>	
For furth	er information c	n-mail address: (	to be used for future annual report notificat all:	- ·	
JESUS	RODRIGUEZ JI	₹	954 7285065 at ()	1.07 1.00Z	
	Name o	f Person	Area Code Daytime Te	lephone Number 1 1 1-3	
Enclosed	Lis a check for th	ne following amount:		A	
■ \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres Registration 5		Street Address: Registration Section	on	

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E&M TRIM SOLUTIONS 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  $\frac{05/07/2021}{}$ \_\_\_ and assigned Florida document number 1.21000213712 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street 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.

City

\* 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>	Name	Address	Type of Action
M	YURISEL A LOPEZ PEREZ	1040 ACADEMY DR. ALTAMONTE SPRINGS	□Add
		FL 32714	■Remove
			□Change
			□Add
			□Remove
			□Change
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te: If the date inserted in this b nument's effective date on the f	st be specific and cannot be prior to date of lock does not meet the applicable statu	atory filing requirements, this d	ng.) Pursuant to 605.020 ate will not be listed a
s filed.			
ed May 25	. 2021		
· Will	Signature of a member or authorized rep	resentative of a member	

Filing Fee: \$25.00