## 121000341907

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## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Div	ision of Cor	porations		
CUDIECT.	TAGSAUT			
SUBJECT:	<del></del>		ited Liability Company	·
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		JOLENE RICE		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		TAGSAUTO LLC		
			Firm/Company	
		10 HARRIS ROAD		
		· · · · · · · · · · · · · · · · · · ·	Address	
		ARCADIA FLORIDA 342	266	
			City/State and Zip Code	
		TAGSAUTO@YAHOO.CO		<u>.                                    </u>
			to be used for future annual report not	ification)
For further in	nformation c	oncerning this matter, please c	all:	
JOLENE RI	CE		941 321-9287 at ( )	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 F	Filing Fee	■ \$30.00 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)
	iling Addres		Street Address: Registration Se	ection
Div	vision of C	Corporations	Division of Co	
P.C	D. Box 632	.7	The Centre of	Γallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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company has been notified in writing of this change.

2022 HAR 23 AM 11: 23

(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears o Liability Company)	SECRETARY OF CALE
The Articles of Organization for this Limited I		רוטרוד	SECRETARY OF STATE
The Articles of Organization for this Limited I	Liability Company	were filed on 1726/2	and assigned
Florida document number L21000341807	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	mation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	10 HARRIS ROAL	O ARCADIA FL
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		10 HARRIS ROAL	O ARCADIA FL
(Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and/or	rogistored office	address on our rece	ords, enter the name of the new registers
agent and/or the new registered office addr		address on our rece	do, ence the name of the new registere
Name of New Registered Agent:	JOLENE RICE	; 	
New Registered Office Address:	10 HARRIS RO	DAD	
New Registered Office Address.		Enter Florida	street address
	ARCADIA		, Florida 34266 Zip Code
	<del></del>	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	į	
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg- being filed to merely reflect a change in the	per and complete gistered agent as <sub>l</sub>	performance of my provided for in Cha	oduties, and I am familiar with and appear 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
AP	MARK TAGGART	10 HARRIS ROAD	□Add
			= Remove
			□Change
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ctive date, if other than the dat	3/15/2022		(optional)
effective date is listed, the date must be	specific and cannot be prior to dat		days after filing.) Pursuant to 605
e: If the date inserted in this block iment's effective date on the Depar		statutory filing requirem	nents, this date will not be liste
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