L21000404215

(Request	or's Name)
(Address)
(Address)
·	•
{City/Sta	te/Zip/Phone #)
(- 3) -	,
PICK-UP] WAIT MAIL
(Busines	s Entity Name)
(544)	, · ·,
(Docume)	ent Number)
(Bocame	in trottibely
Cartified Carlos	Codificator of Status
Certified Copies	Certificates of Status

Special Instructions to Filing Officer:

Please Push to Sunbiz Customer is going to the Bank to show the Changes.

Office Use Only



900376181149



ALLAHASSEE FIL

NOV 19 AM 9: DE

A. BUTLER NOV 1 9 2021

COVER LETTER

TO: " Registration Section **Division of Corporations** A&J AUTO SALES & REPAIRS LLC SUBJECT: 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: A&J AUTO SALES & REPAIRS LLC Name of Person A&J AUTO SALES & REPAIRS LLC Firm/Company 313 TRAENIER DR Address **OLDSMAR** City/State and Zip Code 34677 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AHMAD ATAALLAH 801-8805 Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A&JAUTO SALES & REPAIRS 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	09-13-2021	STATE
	were filed on or to 2021	and assigned
Florida document number L21000404215		
This amendment is submitted to amend the following:		
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 designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	313 TRAENIER DR	
	OLDSMAR F1, 34677	
Enter new mailing address, if applicable:	901 E 93RD AVE	
(Mailing address MAY BE A POST OFFICE BOX)	TAMPA FL 33612	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the	name of the new register
agent and/or the new registered white address here.		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Line: 1 lorna sireet aaaress	
	, Florida	Zip Code
	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 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>	Address	Type of Action
MGR	AHMAD ATAALLAH	313 TRAENIER DR OLDSMAR FL 33612	
			□Remove
		 	
MGR	JOSE MORALES	740 ELLINGTON ST RALEIGH NC 27601	□ Add
		□Remove	
		-	XChange
			= \tag{ \tag{Add}
			□Remove
			□Change
			□Add
			□Remove
			□Remove
			L Change
			\ \ \ \ \
			□Remove
			Change

(If an e <u>Note</u>	tive date, if other than the date of filing: [11-19-2021] (Optional) (Discrive 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): [15] If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
If the rec record is	ord 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 filed.
Date	d
Date	alma atallal
	Signature of a member or authorized representative of a member

Typed or printed name of signee