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T. MATTHEWS
DEC -7 2021

COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor				
CHD IEC		ssy Mobile Detail, LLC			
SUBJEC	·	Name of Lim	ited Liability Company		
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		Thomas Lee Clark			
			Name of Person		
		Classy Chassy Mobile Det	ail, LLC		
			Firm/Company		
		205 SW 75th Street Apt#	10-F		
			Address		
		Gainesville, FL 32607			
			City/State and Zip Code		
		ClassyChassyMobileDetaili	ng@yahoo.com		
		E-mail address: (to be used for future annual	report notification)	
For furthe	er information o	concerning this matter, please ca	all:		
Thomas I	Lee Clark		706 at ()	837-3584	
	Name o	of Person	Area Code	Daytime Telepho	one Number
Enclosed	is a check for t	he following amount:			
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy (additional copy is enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
1	Mailing Addres Registration 1 Division of C	Section	_	ddress: ation Section n of Corporatio	on S
	P.O. Box 632			ntre of Tallahas	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 00.26

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Classy Cl	hassy Mobile Detail LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appea a Limited Liability Company)	ers on our records.)	
The Articles of Organization for this Limited Liability Corida document number	Company were filed on	10/19/2021	and assigned
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the lim	nited liability company h	ere:	
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the	designation "LLC" or t	he abbreviation "L.L.C."
Inter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADD.	RESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
	·————		_
3. If amending the registered agent and/or registere gent and/or the new registered office address here:	ed office address on our	records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:			
New Registered Office Address:			· · · · · · · · · · · · · · · · · · ·
	Enter Flo	orida street address	
·	<u> </u>	, Florida	
	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 = M $AMBR = A$	anager uthorized Member	:				
<u>Title</u>	Name	Address 10 22 Fil 3: 20	Type of Action			
MGR_	Thomas Lee Clark	Addression 22 Fil 3:26 205 SW 75th Street 10-F Gaincs VINC, FL 32607	Mdd			
			□Remove			
			Change			
			□Add			
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an enecuve ote: If th	late, if other than the e date is listed, the date must e date inserted in this ble effective date on the De	t be specific and ca ock does not mee	nnot be prior to t the applicabl	date of filing or	more than 90 ding requireme	_ (optional) ays after filing. ints, this date) Pursuant to 605 will not be liste	i.020 ed a
ecord spe is filed.	ecifies a delayed effective	: date, but not an	effective time	:, at 12:01 а.л	n. on the earlie	er of: (b) Th	e 90th day after	r the
nted	November 17		2021	. ,				
_		homas is	a Un	k				
	· 	Signature of a mor	abor or makerin	ad concognitati				
		Signature of a men	ROCI OF AUTHORIZ	ed representati	ve of a member			