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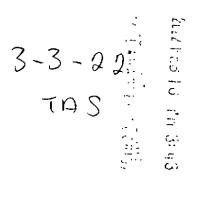
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Office Use Only



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COVER LETTER

TO: Registration Sec Division of Corp	porations		,	
SUBJECT:	AII	America	n Tire Shop	LLC
		Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment :	and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence conce	erning this matter	to the following:	
		Ra	ndall Zwink Name of Person	
			FirnvCompany	
		83	12 Volusia f	21
	-		Mole Terrice, F City/State and Zip Code	
		E-mail address: (uis 50 @ g wai l	ification)
For further information co	oncerning this	s matter, please ca	ill:	
Rand Name of	Person	Zwink	at (<u>813</u>) <u>553</u> Area Code Daytii	9192) ne Telephone Number
Enclosed is a check for the	e following a	mount:		
X \$25.00 Filing Fee		Filing Fee & icate 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 Address Registration S	ection		Street Address: Registration Se	
Division of Co P.O. Box 6327	•		Division of Co The Centre of	•

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

	merican Tire SV	,
(Name of the Limited Li (A F	ability Company as it now appears on o orida Limited Liability Company)	ur r <u>ecorus.</u>)
The Articles of Organization for this Limited Liabil Florida document number <u>L 2100047</u>	• •	~ 2021 and assigned
This amendment is submitted to amend the followin	g:	
A. If amending name, <u>enter the new name of the</u>	limited liability company here:	2522
The new name must be distinguishable and contain the words	"Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	<u> </u>
Principal office address MUST BE A STREET A	DDRESS)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Enter new mailing address, if applicable:		··
Mailing address MAY BE A POST OFFICE BOY	<u> </u>	
B. If amending the registered agent and/or regis agent and/or the new registered office address he		ls, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida so	vet address
		Florida
_	Cuy	Florida 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	Randall K Zwink	8312 Volusia Pl	🗆 Add
		Temple Terrace, FL 3363	27 Kemove
			□Change
MGR	Luis O Perez	11933 N US Hwy 30	
		Thonotosassa, FL 33592-	(c.)
			□Change
			□Remove
			□Change
	-		🗆 Add
			□Remove
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			🗆 Add
			□Remove
			□Change
			□Add
			□Remove

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Filing Fee: \$25.00