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## **COVER LETTER**

TO: Registration Section . Division of Corporations .
SUBJECT: Trip's Car Detailing Service LLC 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:
Eugene P- Triplett Name of Person
Firm/Company
13614 Zoth Street W.
City/State and Zip Code '  Ogbene 69 @ Gmail o Com  E-mail address: (to be used for future annual export notification)
For further information concerning this matter, please call:
Eugene Priplett at (727) 309 3292  Name of Person at (727) Area Code Baytime Telephone Number
Enclosed is a check for the following amount:    \$\sum_{\text{S25.00}}\$ Filing Fee   \$\sum_{\text{S30.00}}\$ Filing Fee &   \$\sum_{\text{Certificate of Status}}\$   \$\s
Mailing Address:  Registration Section  Division of Corporations  Street Address:  Registration Section  Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED

Tein's Car Detai	iling Service 4 AM 8:51
(Name of the Limited Liability Compa (A Florida Limited)	Liability Company)  IALLANA OF STATE
	Almy MASSEF. FL
The Articles of Organization for this Limited Liability Company	
Florida document number <u> </u>	<del>/</del>
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	
The new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13614 120th Street Morth
(Principal office address MUST BE A STREET ADDRESS)	13614 120th Street North Largo, FL 33778
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13614 120th Street Brith Largo FL 33778
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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:

or remove	ed from our records.
ì	
MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00