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(Req	uestor's Name)	
(Adda	ress)	
(Addi	ress)	
(City/	/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer:	

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T. MATTHEWS MAR 23 2022

COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJ	ест: <u>HITTS RE</u>	PAIRS, LLC Name of Limi	ted Liability Company	
The e	nclosed Articles of A	mendment and fec(s) are subr	nitted for filing.	
Please	e return all correspon	dence concerning this matter t	to the following:	
		Corpora	ate Maintenance Lea	ad
			Name of Person	
		Proc	essing Department	
			Firm/Company	
		1	450 Vassar St	
			Address	
			Reno, NV 89502	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For fi	arther information co	oncerning this matter, please ca	all:	
	Processi	ng Department	at (800) 638-2320 Area Code Daytime	
	Name of	_ 	Area Code Daytimo	e Telephone Number
Enclo	osed is a check for th	e following amount:		
2 S	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

.

TO:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 HAR 14 PH 1: 23

	TS REPAIRS, LLC	221
(Name of the Limited Liabili (A Florida	ity Company as it now appears on o a Limited Liability Company)	ur reçords,)
The Articles of Organization for this Limited Liability C Florida document number L22000030899	Company were filed on 01/14/	22 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
	•	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	· · · · · · · · · · · · · · · · · · ·	
·		
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our ress here:	records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	
	emer r tortaa Stre	et autress
	City	, Florida Zip Code
	City	Σιρ Coae

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Thomas P Hitt	1536 Sw Packard Street	
		Lake City, FL 32025	Remove
			☑ Change
MGR	Thomas A Hitt	1536 Sw Packard Street	
		Lake City, FL 32025	Remove
			Change
			O Add
			Remove
			☐ Change
			
			Remove
			Change
			Add
		Remove	
			Change
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			□ Change

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fect	ive date, if other than the date of filing: N/A (optional)
an en	ective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
cun	ent's effective date on the Department of State's records.
rec The	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ated	March 10 . 2022.
	Signature of a meinber or authorized representative of a member
	Signature of a member or authorized representative of a member
	Thomas P Hitt

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Filing Fee: \$25.00