L22000043362

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Suite State Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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LLC N/C Amena

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DEC -9 2022 prints



December 1, 2022

LESLEY JEAN-FELIX 8500 N NEBRASKA AVE TAMPA, FL 32604

SUBJECT: AUTOFX OF TAMPA Ref. Number: L22000043362

We have received your document for AUTOFX OF TAMPA and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 722A00026590

Michael A Hall OPS Clerk

www.sunbiz.org

COVER LETTER

O: Registration Se Division of Cor			
AutoFx of	Tampa .		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Lesley Jean-felix		
		Name of Person	
	Felix Investments LLC		
		Firm/Company	
	8500 N Nebraska ave		
		Address	
	Tampa/ FL/ 32604		
	_	City/State and Zip Code	
	Autofxtampa@gmail.com		
		to be used for future annual report notifi	cation)
For further information c	concerning this matter, please c	all:	
Lesley Jean-felix		813 598-0849 at ()	
Name o	of Person		Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u>	8 <u>5:</u>	Street Address:	

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

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

FILED

AutoFx of Tampa

2022 DEC -9 AM 9: 32

(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	were filed on 1/24/2022	and assigned			
Florida document number 1.22000043362					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
AutoFx of tampa LLC					
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" c	or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	8500 N Nebraksa ave Tampa FL	33604			
(Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable:	8500 N Nebraska ave tampa FL 33604				
(Mailing address MAY BE A POST OFFICE BOX)		·			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter th</u>	e name of the new registered			
Name of New Registered Agent.					
New Registered Office Address:	Enter Florida street address	<u> </u>			
	, Flor	ida 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
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			□Remove
			□Add
			□Remove
			□Change
			□Remove
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Filing Fee: \$25.00