L22 000 123761

(Re	equestor's Name)	
(Ad	idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





100385524271

04/11/22--01034--022 **25.00

2022 APR 11 AH 6: 21
SECRETARY OF STATE
TALLAHASSEE

O SIMMONS APR 2 8 2022

COVER LETTER

	gistration Se ision of Cor			t	
CHDILTT.	GARAGE,	REPAIRMEN LLC	•	•	
SUBJECT:		Name of Lim	aited Liability Company	······································	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please returi	n all correspo	ondence concerning this matter	to the following:		
	Thayer D. Nagib				
			Name of Person		
		Garage Repairmen LLC			
			Firm/Company		
		6421 SW 57th Street			
			Address		
		Davie, FL 33314			
			City/State and Zip Code	-	
		thayernagib@gmail.com			
For further i	nformation c	E-mail address: (oncerning this matter, please c	to be used for future annual report all:	notification)	
Thayer D. N	Vagib		954 774-764	I	
	Name o	f Person	at () Area Code Da	ytime Telephone Number	
Enclosed is	a check for th	ne following amount:			
■ \$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed	
	iling Addres		Street Addres		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT FILED TO ARTICLES OF ORGANIZATION AND 6: 21 OF

SECRETARY OF STATE TALLAHASSEE, FL

GARAGE REPAIRMEN LLC

(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		and assigned
Florida document number 1.22000123761	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "Ll.	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	288
		lorida
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Salih Nagib	6421 SW 57th Street	■Add
		Davic, FL 33314	□Remove
			□Change
			□Add
			□Remove
			□Add
			□Change
			□Remove
			□ Change
			□Add
			□Remove
			[IChange
			🗀 Add
			□Remove
			□Change

D. If amending any other inform	ation, enter change	(8) nere: (Attaci	і ааашэнаі хнееіх, із не	Cessary.)
•				<u> </u>
<u> </u>				
		**		
		·		
				
				
				
E. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and cannot block does not meet the	e applicable statut	lling or more than 90 days aff	
f the record specifies a delayed effect ecord is filed.	ive date, but not an effe	ective time, at 12:	01 a.m. on the earlier of:	(b) The 90th day after the
Dated March 30	. 2023			
	Signature of a member	Mauthorizeg robre	sentative of a member	*
Thayer D. Nagib				
	Typed	or printed name of	signee	

. . .

Filing Fee: \$25.00