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| Special Instructions to | Filing Officer: | |
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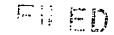
SEP 2 1 2022

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: CRCCCCC CUSTOM C. Lo. SS.C. 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: |
| Cearge Custom Chassia Ahe. |
| 913 FT-1 ctchc C-Que |
| Tampa F-1A 33612 City/State and Zip Code |
| GCCGGGStGCLeSSCAGGGGCGGGGGGGGGGGGGGGGGGGGGGGGGGGGGG |
| For further information concerning this matter, please call: |
| Ceorge Saker at (\$13) 270 - (.683) Name of Person at (\$13) Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, Certificate of Status \$\Bigcup \$\text{Certified Copy} \text{(additional copy is enclosed)} \$\Bigcup \$\text{Certified Copy} \text{(additional copy is enclosed)} \$\Bigcup \$\text{Certified Copy} \text{(additional copy is enclosed)} \$\Bigcup \$\Bigcup \$\Bigcup \$\text{Certified Copy} \text{(additional copy is enclosed)} \$\Bigcup \$\Bigcu |
| Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

General'S Custom Chassics 2022,SEP 21 AHII: 24



| | Cin | Zip Code |
|--|--|--|
| | _ | , Florida |
| New Registered Office Address: | Enter Flori | da street address |
| | | |
| Name of New Registered Agent: | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address h | | cords, enter the name of the new registered |
| | | **** |
| (Mailing address MAY BE A POST OFFICE BO | <u></u> | |
| Enter new mailing address, if applicable: | | |
| (Principal office address BIOST BE A STREET A | | |
| (Principal office address MUST BE A STREET A | | |
| Enter new principal offices address, if applicabl | | |
| The new name must be distinguishable and contain the words | s "Limited Liability Company," the de- | signation "LLC" or the abbreviation "L.L.C." |
| A. If amending name, enter the new name of the | e limited liability company her | <u>'e</u> : |
| This amendment is submitted to amend the followi | ng: | |
| Florida document number <u>LDDCCC134</u> | 337 | |
| The Articles of Organization for this Limited Liabi | | arch 17.202) and assigned |
| · | , , , | PER SEE FI |
| (Same of the Charted L | Florida Limited Liability Company) | on our records.) |

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> | <u>Name</u> | Address | Type of Action |
|--------------|-----------------|-------------------------------------|----------------|
| Mar | George B. Baker | 913. E Fletcher Ave. | □ Add |
| | | 913. E Fletcher Ave. TAAPA FL 336/2 | ∃ Kemove |
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|). If an | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| Note | tive date, if other than the date of filing: |
| the reco | ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. |
| Date | Septemberi 21 2022 Signature of a member or authorized representative of a member |
| | |
| | Corge Bek-C Typed or printed name of signee |

Filing Fee: \$25.00