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Special Instructions to	Filing Officer.	

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## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations		
subject: Pun	na Auto Tint Name of Lim	LLC ited Liability Company	<del> </del>
	Amendment and fee(s) are sub ndence concerning this matter		
	Jair Buitrag	Name of Person	
	Puma Auto	Tind LLC Firm/Company	
	- 410 N	State Road 7 Address	
	Hollywood	FC 33021 City/State and Zip Code	
	E-mail address: (	Pumawindow+in+ @ to be used for future annual report noti	? amail. com
For further information co	oncerning this matter, please ca	all:	
Brenda (	<u>Pancel</u> FPerson	at (407) 480 - Area Code Daytim	1818 e Telephone Number
Enclosed is a check for th	ne following amount:		
LY \$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)
Mailing Addres Registration S Division of C	Section orporations	Street Address: Registration Se Division of Cor	porations
P.O. Box 632	1	The Centre of T	ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> Puma Huto lint LLC</u>		
(Name of the Limited Liability Compa (A Florida Limited I	<u>.ny as it now appears on our records</u> Liability Company)	<u>v</u> )
The Articles of Organization for this Limited Liability Company Florida document number <u>L 22 000172159</u> .  This amendment is submitted to amend the following:		
This amendment is submitted to amend the following.		
A. If amending name, enter the new name of the limited liab  Puma Window Tint LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	- 410 N State	Road 7
(Principal office address MUST BE A STREET ADDRESS)	Hollywood FC	33021
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	410 N State Ro Hollywood FC 3	2000 7 2000 1
B. If amending the registered agent and/or registered office a	address on our records, <u>enter</u>	the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida street address	ľ
		orida Zip Code
No. 10 and 10 an	City	х.тр Coae
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agraprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office	performance of my duties, an provided for in Chapter 605, I	d I am familiar with and F.S. Or, if this document is

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 er removed from our records:

MGR =	Manager	
AMBR =	Authorized	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u></u>		
			□Remove
			□Change
			□Add
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(If an eff	ive date, if other than the date of filing:
he recor ord is fi	d 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 led.
Dated	October 17, 2022.
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member
	Jair Buitrago. Brenda Cancel