# L2900988692

(R	equestor's Name)				
(A	ddress)				
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(C	ity/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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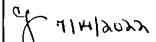
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### COVERIFTER

COVER LETTER							
TO: Registration Section Division of Corporations							
SUBJECT: P4F Mobile Mechanic, 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:							
Howard A Gun III Name of Person							
P+F movile mechanic LLC Firm/Company							
5305 2. Arthur St Address							
Tour City/State and Zip Code							
D'mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Howard Gran at (352) 287-1701  Name of Person Area Code Daytime Telephone Number							
Enclosed is a check for the following amount:							
□ \$25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)							

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

64 E MODI	e Me	v as it now appears on lability Company)	. LC	2022 JUL 14 PH 12: 09
(Name of the Limited (A	Florida Limited L	iy <u>as it now appears on</u> lability Company)	our records.)	100 <u>1</u> 00
The Articles of Organization for this Limited Liab	ility Company	were filed on	127 )	and assigned
Florida document number <u>L2200028</u>	8(10)22			
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	<u>ne limited liabi</u>	lity company here:		
The new name must be distinguishable and contain the word	ls "Limited Liabili	ty Company," the design	nation "LLC" or	the abbreviation "L.L.C."
·		y company, and many		
Enter new principal offices address, if applicab				<u> </u>
(Principal office address MUST BE A STREET)	<u>ADDKESS)</u>	· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>			···
B. If amending the registered agent and/or reg agent and/or the new registered office address l		ddress on our reco	rds, <u>enter the</u>	name of the new registered
Name of New Registered Agent:				
New Registered Office Address:		Enter Florida		
		City	, Florid	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
MGB	Howard A Countil	15365 E Arthur St	IDXdd
	,	Inverness, FL 3445.	<u>⊋</u> □Remove
	-	· · · · · · · · · · · · · · · · · · ·	□Change
MGR	Stephenie Gunn	5365 Farther St	🗆 Add
		Inverness fr 3415	2 PRemove
			□Change
AMBR	Stephence bon	5315 & Arthur St	/Z/Add
		Invernoss FL 34458	<b>∑</b> □Remove
			DChange
<del></del>			□∧dd
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

· · · · D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_(optional) (If an effective 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed.

document's effective date on the Department of State's records.

The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at ord is filed.

Dated

Signature of a member or authorized representative of a member

Howard Company Typed or printed name of signee