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COVER LETTER

TO: Registration Division of	n Section Corporations		
	OCAL GARAGE DOOR LLC		
SUBJECT:	Name of Lim	ited Liability Company	_
The enclosed Articles	s of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	. 2009
	YOSEF HAY YOSI COH	EN	
		Name of Person	
	AAA LOCAL GARAGE	DOOR LLC	
		Firm/Company	
	4910 SILVER GATE LN	UNIT 223	ഗ
	-	Address	
	FORT MYERS, FL 33907		
	yossycohen2606@gmail.cc	City/State and Zip Code	
	• •	to be used for future annual report notification)
For further information	on concerning this matter, please c	all:	
YOSEF HAY YOSI	COHEN	239 849-1930 at ()	
Nai	ne of Person	Area Code Daytime Telep	hone Number
Enclosed is a check f	or the following amount:		
■ \$25.00 Filing Fe	e S30.00 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)
Division of P.O. Box	on Section of Corporations	Street Address: Registration Section Division of Corporat The Centre of Tallah 2415 N. Monroe Stree Tallahassee, FL 3230	assee eet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our re Limited Liability Company)	cords.)		
he Articles of Organization for this Limited Liability C	ompany were filed on 07/05/2022	and assigned		
lorida document number L22000299941	<u>_</u> ·			
nis amendment is submitted to amend the following:				
. If amending name, enter the new name of the limi	ted liability company here:			
//A				
ne new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation	'LLC" or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	N/A	3		
Principal office address MUST BE A STREET ADDI	RESS)			
		" ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		
nter new mailing address, if applicable:	N/A			
Aailing address MAY BE A POST OFFICE BOX)		·		
		·		
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	d office address on our records, <u>er</u>	nter the name of the new regi		
Name of New Registered Agent: N/A				
New Registered Office Address:	F . Fl	dduaes		
	Enter Florida street address			
		. Florida		

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>	Name	Address	Type of Action
AMBR	LILY AMIR	4910 SILVER GATE LN UNIT 223	= Add
		FORT MYERS, FL 33907	□Remove
			□ Change
			□Add
			□Remove
			☐ Change
			☐Àdd ☐ ☐Remove
			ن. ن. ☐Change
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fective date, if other than the date of filing:		(opt	ional)	
n effective date is listed, the date must be specific and cannot be tee: If the date inserted in this block does not meet the cument's effective date on the Department of State's recommendation.	applicable statutory	or more than 90 days after filing requirements, the	er filing.) Pursuz iis date will no	ant to 605.020 of be listed a
ecord specifies a delayed effective date, but not an effe is filed. 08/11/2022	ctive time, at 12:01 :	a.m. on the earlier of: (b) The 90th	day after th
		ı		

Typed or printed name of signee