## Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220003717183)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: REGISTERED AGENTS INC.

Account Number: I20090000081

: (307)200-2803

Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **EVERYTHING AUTOMOTIVE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

K. Brumbley

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF \*

## **EVERYTHING AUTOMOTIVE 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 Company v	vere filed on 08/09/22	and assigned
Florida document number L22000350368		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the	abbreviation "L.1C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	· • • • • • • • • • • • • • • • • • • •	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adaptated and/or the new registered office address here:	ddress on our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:		<b>202</b>
		200
New Registered Office Address:	Enter Florida street address	Jan William
	, Florida _	
	City	Zip Codi
New Registered Agent's Signature, if changing Registered Agent:		7. 5.
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I an rovided for in Chapter 605, F.S. O	n familiar with and r, if this document is

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>	Name	Address	Type of Action
AMBR	Morales, Richard	7901 4th St NSTE 300	🗹 Add
		St. Petersburg, FL 33702	□Remove
			□Change
			□Adđ
			□Remove
			□Change
			①Add
			□Remove
			DChange
			□Add
			Remove
			□Change
			□Add
			□Remove
			DChange
			□Add
			□Remove
			□Change

	any other information, enter				
				· · ·	
			<del></del>		
·				1	
<del></del>					
-		<del></del>			
		,			
		<del>-</del>			
					<del></del>
<del></del>		<u> </u>		-	
				.*	
(If an effective d. Note: If the c	te, if other than the date of fili ate is listed, the date must be specific a date inserted in this block does not ffective date on the Department of	nd cannot be prior to o timeet the applicabl	date of filing or more tha	an 90 days after filing.) Pur	suant to 605 0207 (3 not be listed as th
he record speci ord is filed.	fies a delayed effective date, but n	ot an effective time	e, at 12:01 a.m. on the	e earlier of: (b) The 90	th day after the
Dated Octo	ober 31	2022			
	Riber Signature of	a member or authorize	ted representative of a r	nember	
	Riley Park		,		
		Typed or printed i	name of signee		

Filing Fee: \$25.00