

L22 000 405 459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

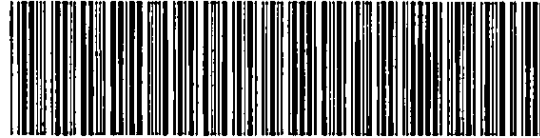
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

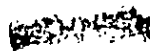
Office Use Only



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FILED  
OCT 18 AM 10:24  
CLERK OF STATE  
TALLAHASSEE, FL

10/18/22--01018--027 \*\*25.00

  
R. HUNT

## COVER LETTER

TO: Registration Section  
Division of Corporations

A&Z Car Services, LLC

SUBJECT: \_\_\_\_\_  
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:

Valerie Dornema

\_\_\_\_\_  
Name of Person

A&Z Car Services, LLC

\_\_\_\_\_  
Firm/Company

5242 Dixie Dr

\_\_\_\_\_  
Address

Naples, FL 34113

\_\_\_\_\_  
City/State and Zip Code

Paulduckens509@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

FILED  
JUN 18 AM 10:24  
TALLAHASSEE, FL  
DIVISION OF STATE

For further information concerning this matter, please call:

Valerie Dornema

239 465-3151

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

A&Z Car Services, 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 were filed on September 16, 2022 and assigned  
Florida document number L22000405459.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

**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 address on our records, enter 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*

Florida

*City*

*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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Valerie Dornema	3823 TAMiami TRILE #1010	<input type="checkbox"/> Add
		NAPLES, FL 34112	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Duckens Paul	3823 TAMiami TRILE #1010	<input checked="" type="checkbox"/> Add
		NAPLES, FL 34112	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Valerie Dornema	3823 TAMiami TRILE #1010	<input type="checkbox"/> Add
		NAPLES, FL 34112	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

RECEIVED  
MAY 18 10:25 AM  
STATE OF FLORIDA  
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CLERK OF STATE  
TAMPA, FL

LED  
2012 OCT 18 AM 10:25  
CLERK OF STATE  
TAMMSEEL FL

(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)

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.

Valerie Dymova

Valerie Dornema

Typed or printed name of signee