Florida Department of State Division of Corporation

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.

(((H220003633123)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

To:					
	Division of C				
	Fax Number	: (850)617-638	3		
From:					
		: BLANCO ACCOU	NTING I, I	NC.	
		r : I20100000060	,		
		: (305)828-114 : (305)828-170			
anı	the email addre nual report mail	ess for this busi lings. Enter only	ness entit one emai	y to be used l address plo	for future
anı	nual report mail	lings. Enter only	ness entit , one emai	y to be used l address plo	i for future ease.**
anr Em:	nual report mail	lings. Enter only	one emai	address plo	ease.**
anr Em:	nual report mail	lings. Enter only ESTATE/CORR EST COAST T	one emai	address plo	ease.**
anr Em:	nual report mail nil Address: LC AMND/RE	ESTATE/CORR EST COAST To	one emai	address places places M/MG RE	ease.**
anr Em:	ail Address: LC AMND/RE WI	ESTATE/CORR EST COAST To	one emai	address plo M/MG RE LLC	ease.**

Electronic Filing Menu Corporate Filing Menu

Help

OCT 25 2011 Rnimbley

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WEST COAST TURBOS LLC	<u></u>	
(Name of the Limited Liability Compan (A Florida Limited Li	y as (t now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company velocida document number L22000431351	were filed on 10/17/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."
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 a agent and/or the new registered office address here:	address on our records, enter the na	me of the new registered
Name of New Registered Agent:		022 061 2 500 061 2 500 061 2
New Registered Office Address:	Enter Florida street address	
·	, Florida _	Zip Colle
New Registered Agent's Signature, if changing Registered Agent:	- /	<u> </u>

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	VILORIO, CARMEN G	421 JOHNS AVE LEHIGH ACRES FL 33972	□Add
			■Remove
			□Change
AMBR	VILORIO, GERTRUDIS C.	421 JOHNS AVE LEHIGH ACRES FL 33972	
			Remove
			Change
			□Add
			□Remove
			□ Change
			🖸 Add
			□Remove
			Change
			🗆 Add
			Remove
			□Add
			□Remove
			🗆 Change

					essary.)	
			· · · · · · · · · · · · · · · · · · ·			
	<u></u>					
						
	···	_				
				·		_
						_
	 					
		<u></u>				
					· · · · · · · · · · · · · · · · · · ·	
Effective date, if other than If an effective date is listed, the date Note: If the date inserted in the document's effective date on t	is block does not m	eet the applicab	date of filing or m le statutory filin	(op ore than 90 days af g requirements, t	tional) ter filing) Pursuan his date will not	t to 605.020 be listed as
e record specifies a delayed eff rd is filed.	ective date, but not	an effective tim	e, at 12:01 a.m.	on the earlier of:	(b) The 90th d	ay after the
Dated	,	2022	_·			
	Gertrudis	c Vilorio				
	Signature of a r	nember or author	zed representative	of a member	_ 	

Filing Fee: \$25.00