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COVER LETTER

Registration Section

Division of Corporations

Tallahassee, Fl. 32314

TO:

SUBJECT:	Name of Lim	ited Liability Company		
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Minhchau Peoples			
	· · · · · · · · · · · · · · · · · · ·	Name of Person		
	Steve Buys Junk Cars LLC	-		
		Firm/Company		
	2775 N W St #310			
		Address		
	Pensacola, FL. 32505			
		City/State and Zip Code	· · · · ·	
	stevebuysjunkcars@gmail.c		···	
Contractor Comment		to be used for future annual report not	incation)	
	oncerning this matter, please co			
Cheryl Whalen		850 454-6023 at ()		
Name o	f Person	Area Code Daytin	ne Telephone Number	
inclosed is a check for th	ne 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 enclose	
		o		
Mailing Address: Registration Section		Street Address: Registration Section		
Division of C	orporations	Division of Cor	rporations	
P.O. Box 6327		The Centre of T	l'allahassee	

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Steve Buys Junk Cars LLC

2023 COT 31 PH 5: 21

(A F)	orida Limited Liability Company)	records.)	
The Articles of Organization for this Limited Liabili	ty Company were filed on December i		
Florida document number L22000528908			
This amendment is submitted to amend the following	g'.		
A. If amending name, enter the new name of the	limited liability company here:		
TWM Cores LLC			
The new name must be distinguishable and contain the words	Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	<u> </u>	A187	
Principal office address MUST BE A STREET AI	ODRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or regist agent and/or the new registered office address her	_	nter the name of the new registere	
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida street address		
_		_, Florida Zip Code	
	Cuy	Zip Code	
New Registered Agent's Signature, if changing Regist	tered Agent:		
hereby accept the appointment as registered ago provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	nd complete performance of my dutie d agent as provided for in Chapter (tered office address, I hereby confir	es, and I am familiar with and 605, F.S. Or, if this document is	
	If Changing Registered Agent Signa	ture of New Registered Agent	

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Cheryl Whalen	1211 Cheyenne Circle	= Add
		Pensacola, FL. 32505	□Remove
			Change
			□Add
		- -	Remove
			Change
			□Add
			□Remove
			Change
			□Remove
		-	Change
			□Remove
			Change
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(It'an e <u>Note</u>	e: If the date inserted	e date must be specil in this block does	fic and cannot be pri not meet the app	licable statutory fi	r more than 90 days after	onal) r filing.) Pursuant to 605.03 s date will not be listed	
docu	ument's effective date	on the Departmen	it of State's recon	us.			
the rececord is		d effective date, bi	ut not an effective	e time, at 12:01 a.r	m. on the earlier of: (b	o) The 90th day after the	he
	October 12		2023				
Date				·			
Date	Cher	ul Wh	alen				
Date	Cheri	yl Wh.	alen Fof a member or au	thorized representat	ive of a member		
Date	Cheryl Whaler		alen e of a member or au	thorized representat	ive of a member		

Filing Fee: \$25.00