L23 0000 36514

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, ,
(Document Number)
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TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations			
	E STOP REPAIR, L.L.C.			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	RAMNIEZ LESTAGE			
		Name of Person		-
		Firm/Company		-
	8371 DYNASTY DRIVE			2021 HAY 21 SEARLY AND
		Address		2
	BOCA RATON, FL 334	133		
		City/State and Zip Code	· · ·	
	ramlestage@gmail.com E-mail address: (to be used for future annual report not	ification)	-1, 2
For further information of	oncerning this matter, please c	all:		
RAMNIEZ LESTAGE		954 604-9671		
Name o	Person	at () Area Code Daylin	e Telephone Number	
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Addres Registration S Division of C P.O. Box 632	ection orporations	Street Address: Registration Se Division of Cor The Centre of T	porations	

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

RECEIVED

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nie one 5to	D Repair 1.L	, C,
(Name of the Limited Liability Comp		ords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000036514</u>	y were filed on 01/19/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	<u> </u>
		THE THE
Enter new mailing address, if applicable:		1/21
(Mailing address MAY BE A POST OFFICE BOX)		- 0
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ento</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
	City	Florida 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>	Name	Address	Type of Action
AMBR	RAMNIEZ LESTAGE	8371 DYNASTY DRIVE, BOCA RATON, FL 3343.	3 ■Add
			_ □Remove
			_ Change
CEO	MALACHI M LESTAGE		_ 🗆 Add
		8371 DYNASTY DRIVE, BOCA RATON, FL 3343.	3 _ ■Remove
			☐Ghange
		<u></u>	<u><</u> □ 7 7dd
			Remove
			☐ Change
			_ □Remove
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Effective date, if other than the if an effective date is listed, the date must note: If the date inserted in this blaccument's effective date on the D	st be specific and cannot be prior to date of to ock does not meet the applicable status	(option filing or more than 90 days after fi tory filing requirements, this o	ling.) Pursuant to 605.0207
e record specifies a delayed effectived is filed.	re date, but not an effective time, at 12:	:01 a.m. on the earlier of: (b)	The 90th day after the
MARCH 18	2023		
Dated			
Dated	Signature of a member or authorized repre	econtative of a minutes	

Filing Fee: \$25.00