# L23000043663

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Monday, July 31, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: **DIESELMEDIC**, LLC

We have included payment in the amount of \$25.00 for the following fees:

Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

# Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

#### **COVER LETTER**

	tion Section of Corporations	
SUBJECT: DI	SELMEDIC, LLC  Name of Limited Liability Company	
The enclosed Art	cles of Amendment and fee(s) are submitted for filing.	
Please return all o	orrespondence concerning this matter to the following:	
	Corporate Maintenance Lead	
	Name of Person	
	Processing Department	
	Firm/Company	
	1450 Vassar St	
	Address	
	Reno, NV 89502	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further inform	tion concerning this matter, please call:	
Pro	assing Department	
	essing Department at (800 ) 638-2320  Area Code Daytime Telephone Number	
	Area Code Daytime Telephone Number	
Enclosed is a chee	for the following amount:	
<b>□</b> \$25.00 Filing	Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing F	Status &
	1AILING ADDRESS: STREET/COURIER ADDRESS: egistration Section Registration Section	

Division of Corporations

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

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(	)F	<b>2023</b> SEC TALL,
DIESELM	EDIC, LLC	AUG. AHGAN AHAS
( <u>Name of the Limited Liability Comp.</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	SEX
The Articles of Organization for this Limited Liability Company Florida document number L23000043663		FILE B
This amendment is submitted to amend the following:		> 01
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	100 Little Orange Lake Dr	_
(Principal office address MUST BE A STREET ADDRESS)	Hawthorne, FL 32640	
Enter new mailing address, if applicable:	100 Little Orange Lake Dr	
Mailing address MAY BE A POST OFFICE BOX)	Hawthorne, FL 32640	
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	fice address on our records, <u>e</u> 2:	nter the name of the ne
· · · · · · · · · · · · · · · · · · ·	-	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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>	Address	Type of Action
MGR	Jamie Walker	100 Little Orange Lake Dr.	
		Hawthorne, FL 32640	Remove
			☑ Change
<del></del>			🗆 Add
			Remove
			Change
			□ Remove
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Effective (	late, if other than the	date of filing: N/A	(optional) gor more than 90 days after filing.) Pursuant to 605.020
- <u>2000</u> 11 01	ie date inserted in this bid	pock does not meet the applicable statutory partment of State's records.	filing requirements, this date will not be listed a
the record ) The 90t	specifies a delayed th day after the reco	effective date, but not an effectiond is filed.	ve time, at 12:01 a.m. on the earlier o
Dated	July 31	2023	
_	Mo	<u> </u>	
-	——————————————————————————————————————	Signature of a member or authorized represent	ative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00