L 23 0000 74326

(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:



300408454033

05/12/23--01012--012 **25.00

2023 JUL 25 FH I2: 17

Office Use Only

Le 206

of Maghans

COVER LETTER

Registration Section Division of Corporations

TO:

EFG Guita	r Repair LLC				
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	William Fels				
	<u></u>	Name of Person			
	EFG Guitar Repair LLC				
	·	Firm/Company			
	2770 S Ronald Reagan Blv	zd			
	· · · · · · · · · · · · · · · · · · ·	Address	· · · · · · · · · · · · · · · · · · ·		
	Altamonte Springs, FL 32	701			
		City/State and Zip Code	 _		
	EFGguitarrepair@gmail.co				
	E-mail address: (to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c	all:			
William Fels		407 864-4476			
Name of Person		Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	he 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 5	Section	<u>Street Address:</u> Registration Sc			
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee		
Tallahassee, 1			raffanassee De Street, Suite 810		

Tallahassee, FL 32303



July 8, 2023

WILLIAM FELS 2770 S RONALD REAGAN BOULEVARD ALTAMONTE SPRINGS, FL 32701

SUBJECT: EFG GUITAR REPAIR LLC

Ref. Number: L23000074326

We have received your document for EFG GUITAR REPAIR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II



Letter Number: 823A00015176

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 JUL 25 Pir 12: 17

EFG Guitar Repair LLC		1023 002 2	-5 THIZ: 1
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on conted Liability Company)	our records.)	NOTE FL
The Articles of Organization for this Limited Liability Comp	pany were filed on 02/09/20)23	and assigned
Florida document number L23000074326			
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 I	Liability Company," the designa	ntion "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	<u>S)</u>	-	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our record	is, <u>enter the n</u>	ame of the new register
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida sti	reet address	
		, Florida	Zip Code
	City		Zip Gode
New Registered Agent's Signature, if changing Registered Ag	<u>ent:</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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

Title .	<u>Name</u>	<u>Address</u>	Type of Action
AP	Joshua Gilmore	2770 S Ronald Reagan Blvd	
		Altamonte Springs, FL 32701	■Remove
			Change
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
			□ Chango

• . ,	,					
_						
	.,					
_						
-	<u> </u>				,	
_						
_						
						
_				 -		
_						
	100					
						
						_
					·	
						
						
ff	on alono 18 on la con Alecco	Ab 2-A CEU-				
an effection		ate must be specific and this block does not n	l cannot be prior to d neet the applicable		(optional) nan 90 days after filing.) Pu puirements, this date wil	
record I is file	l specifies a delayed e ed.	ffective date, but not	an effective time.	, at 12:01 a.m. on th	e carlier of: (b) The 9	Oth day after the
ated _	May 8		. 2023			
		311 WW	10			

Typed or printed name of signee