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COVER LETTER

TO:

TO: Reg Div	istration Sec ision of Corp	ction oprations	•	v ,	
our in or	FLORIDA N	MOBILE FLEET PAINTING	LLC		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	ndence concerning this matter	to the following:		
		DANIEL CUMMINGS			
			Name of Person		
		FLORIDA MOBILE FLEI	ET PAINTING LLC		
	Firm/Company				
		8786 N PRESNELL TER			
			Address		
		DUNNELLON FL 34433			
		 	City/State and Zip Code		
		FLORIDAMOBILEFLEET	_		
For further in	iformation co	E-mail address: () oncerning this matter, please ca	to be used for future annual report noti all:	fication)	
DANIEL CU			352 860-3882 at ()		
	Name of	Person		e Telephone Number	
Enclosed is a	check for th	e following amount:			
■ \$25.00 F	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)	
	iling Address		Street Address:	ation	
	gistration S vision of Co	ection orporations	Registration Se Division of Cor		
). Box 632	-	The Centre of T	•	
Tal	lahassec, F	L 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L23000106427	were filed on	2-28-2023	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :	
FLORIDA MOBILE FLEET	SERVICES LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the des	signation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8786 N PRESNELL TER		
(Principal office address MUST BE A STREET ADDRESS)	DUNNELLON F	L 34433	
Enter new mailing address, if applicable:	8786 N PRESNE	LL TER	Car.
(Mailing address MAY BE A POST OFFICE BOX)	DUNNELLON F	TL 34433	
		-	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our rec	cords, <u>enter the</u>	name of the new regis
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Floria	la street address	
	Circ	, Florid	Zip Code
	City		лір Соав

New Registered Agent's Signature, if changing Registered Agent:

FLORIDA MOBILE FLEET PAINTING LLC

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
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			Change
			□Add
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			☐ Change
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ONLY AMENDING NAME C	HANGE.			
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ctive date, if other than the d effective date is listed, the date must be: If the date inserted in this blocument's effective date on the Dep	be specific and cannot be rock does not meet the ap	plicable statutory fi		filing.) Pursuant to 605.020
ord specifies a delayed effective of filed.	date, but not an effectiv	ve time, at 12:01 a.r	n, on the earlier of: (b) The 90th day after th
august 16th	2023	·		
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