L23000130472

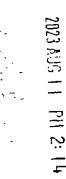
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A. PARISHANI AUG 2 7 2023

COVER LETTER

Division of Cor			•					
NELTO BA	ASLIMBE LLC							
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·					
			202 .:.					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	2023 AUS 11					
Please return all correspo	ondence concerning this matter	to the following:						
			PH					
	NELTO AUGUSTE		: I					
		Name of Person	2: 14					
		Firm/Company						
	3978 NW 38TH AVE							
		Address						
	LAUDERDALE LAKES	FL 33309						
		City/State and Zip Code	41-4					
								
Var further information a	e-mail address: (to be used for future annual report no	uncation)					
	concerning this matter, piease c							
NELTO AUGUSTE		954 3309865 at ()						
Name o	of Person	Arca Code Daytii	me Telephone Number					
Enclosed is a check for t	he following amount:							
■ \$25.00 Filing Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					
<u>Mailing Addres</u> Registration		Street Address: Registration S	ection .					
Division of C P.O. Box 632	=	Division of Corporations						
Tallahassee,			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		.
NELTO BASLIMBE LLC		 .
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	<u>~</u>
The Articles of Organization for this Limited Liability Company w	ere filed on 03/14/2023	and assigned
Florida document number L23000130472		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	ty company here:	
NELTO BASLIMBE CAR WASH DETAILS LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
-		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		,
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, enter the	name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	9

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

'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
AMBR	FRITZNEL AUGUSTIN	3948 NW 38TH AVE	■Add
		LAUDERDALE LAKES, FL 33309	□Remove
			□Change
			🗖 Add
			□ Remove 2023 □ □ Change
			☐Remove ☐Change ☐Add ☐Remove
			□Add
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an effective date in the date in the date.	if other than the s listed, the date mu- inserted in this b tive date on the D	st be specific an lock does not	id cannot be pric meet the appli	cable statutor			filing.) Pu		
record specifies Lis filed.	a delayed effectiv	ve date, but no	ot an effective	time, at 12:01	a.m. on the ea	arlier of: (b) The 90	Oth day after	the .
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ated	i								
ated(Signature of a	member or aut	horized represe	ntative of a mer	nber			

Filing Fee: \$25.00