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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

	CAT SOFTWASH LLC					
SUBJECT:	Name of Limi	ted Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.				
Please return all correspo	indence concerning this matter	to the following:				
		Robert Galy				
		Name of Person				
	BOBKAT SOFTWASI	HLLC DBA BOBKAT IRENT CA	R RENTAL			
		Firm/Company				
	1601 Belvedere Road c/o Embassy Suites by Hilton West Palm Beach					
		Address				
	W	est Palm Beach, fl 33406				
		City/State and Zip Code				
	F-mail address: tt	bobster176@icloud.com  o be used for future annual report notif	ication)			
For further information c	oncerning this matter, please co	·				
Robert Glay		561 957-4820				
Name o	l'Person	Area Code Daytime	Telephone Number			
Enclosed is a check for the	he following amount:					
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			

TO:

Registration Section **Division of Corporations** 

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOBKAT SOFTWA	ASH LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <a href="L23000137857">L23000137857</a> .  This amendment is submitted to amend the following:	were filed on 03/17/2023	and assigne	ed	
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	previation "L.L.C."		
Enter new principal offices address, if applicable:	1601 Belvedere Road			
(Principal office address MUST BE A STREET ADDRESS)	c/o Embassy Suites by Hilton West Palm Beach			
	West Palm Beach, FL 33406			
Enter new mailing address, if applicable:	1601 Belvedere Road			
(Mailing address MAY BE A POST OFFICE BOX)	c/o Embassy Suites by Hilton West Palm Beach			
	West Palm Beach, FL 33406			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the name	of the new re	gisterec	
	, Florida	0		
	City	Zip Cōæ		
New Registered Agent's Signature, if changing Registered Agent:		ĊŪ		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am fo provided for in Chapter 605, F.S. Or, i	ımiliar with an if this documen	nd	

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	ROBERT GALY	1601 Belvedere Road	□Add
		e/o Embassy Suites by Hilton West Palm Beach	□Remove
		West Palm Beach, FL 33406	<b>■</b> Change
AMBR	KATHLEEN GALY	1601 Belvedere Road	
		c/o Embassy Suites by Hilton West Palm Beach	□Remove
		West Palm Beach, FL 33406	
AMBR	ROBERT GALY	1601 Belvedere Road	<b>≣</b> Add
		c/o Embassy Suites by Hilton West Palm Beach	□Remove
		West Palm Beach, FL 33406	_
			□Add
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	late, if other than the date is listed, the date is contact the date in this	nust be specific and block does not m	cannot be prior to eet the applicabl	date of filing or more	(option than 90 days after fil equirements, this d	ing.) Pursuant to 605.0	0207 d as
n offective <u>te:</u> If the	effective date on the						
n effective ote: If the cument's cord spe	effective date on the	tive date, but not	an effective time	e, at 12:01 a.m. on	the earlier of: (b)	The 90th day after	the
n effective ote: If the cument's ecord spe is filed.		tive date, but not	an effective time	e, at 12:01 a.m. on	the earlier of: (b)	The 90th day after	the
n effective ote: If the cument's ecord spe is filed.	ecities a delayed effect		2024	e, at 12:01 a.m. on		The 90th day after	the

Filing Fee: \$25.00