L23000270998

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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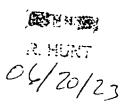
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COVER LETTER

| | Registration Sec Division of Corp | | | |
|--------------------------|--------------------------------------|--|--|---|
| | | AST FIX LLC | | |
| SUBJEC' | ſ: | Name of Lim | ited Liability Company | |
| | | | | |
| The enclo | sed Articles of A | mendment and fee(s) are sub- | mitted for filing. | |
| Please reti | um all correspon | dence concerning this matter | to the following: | |
| | | ROMAN GORODILIN | | |
| | | | Name of Person | - |
| | | ROMAN'S QUICK FIX L. | LC | |
| | | | Firm/Company | |
| | 83 | | | |
| | | | Address | <u></u> |
| | | SUN CITY CENTER, FL. | 33573 | |
| | | • | City/State and Zip Code | |
| | | maxdimol@gmail.com | , | PN 9: 37 |
| | | E-mail address: (| to be used for future annual report notification) | TATE |
| For furthe | r information co | ncerning this matter, please ca | all: | • |
| ROMAN | GORODILIN | | 415 310-7311 at () | |
| | Name of | Person | Area Code Daytime Telephone No | umber |
| Enclosed | is a check for the | e following amount: | | |
| □ \$25.0 | 0 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | Certified Copy Cer (additional copy is enclosed) Cer | 00 Filing Fee. tificate of Status & tified Copy itional copy is enclosed) |
| _ | Mailing Address Registration S | | Street Address: Registration Section | |
| Division of Corporations | | | Division of Corporations | |
| | P.O. Box 6327 Fallahassee, F | | The Centre of Tallahassee 2415 N. Monroe Street, Su | ite 810 |
| | i ananassee, F | U 24217 | ZTID IV. MIDITION DUCCE, DU | 16 010 |

Tallahassee, FL 32303

COVER LETTER

TO: > Registration Section **Division of Corporations** ROMAN'S FAST FIX LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: ROMAN GORODILIN Name of Person ROMAN'S QUICK FIX LLC Firm/Company 401 DORCHESTER PL, # 66 Address SUN CITY CENTER, FL 33573 City/State and Zip Code maxdimol@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ROMAN GORODILIN Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, **■** \$55.00 Filing Fee & ☐ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status & Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed)

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

| ROMAN'S FAST FIX LLC | |
|---|---|
| (Name of the Limited Liability Company as it now (A Florida Limited Liability Com | appears on our records.) apany) |
| The Articles of Organization for this Limited Liability Company were filed Florida document number L23000270998 | on <u>06/05/2023</u> and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liability compa | any here: |
| ROMAN'S QUICK FIX LLC | |
| he new name must be distinguishable and contain the words "Limited Liability Company | "the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | |
| Principal office address MUST BE A STREET ADDRESS) | |
| THE PART OFFICE WARTESS MOST BE TISTREET TIBERESS, | |
| | Sep. 3 0 |
| Enter new mailing address, if applicable: | E. FA |
| | m |
| Mailing address MAY BE A POST OFFICE BOX) | |
| | - |
| 3. If amending the registered agent and/or registered office address on gent and/or the new registered office address here: | our records, <u>enter the name of the new regis</u> |
| Name of New Registered Agent: | |
| New Registered Office Address: En | nter Florida street address |
| | ma |
| City | , Florida Ziv 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 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 | GORODILIN, ROMAN | 401 DORCHESTER PL. # 66 | □Add |
| | | SUN CITY CENTER, FL 33573 | □Remove |
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| ctive date, if ot effective date is list | her than the ed. the date mus | date of filin t be specific an | ig:id cannot be pri | ior to date of | filing or more | than 90 day | optional s after filing |) g.) Pursi | uant to | 605.020 |
| e: If the date inso | erted in this bl | ock does not i | meet the app | licable statu | tory filing r | equirement | s, this dat | e will r | ot be | listed a |
| ument's effective | date on the D | epartment of | state's record | us. | | | | | | |
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| ed | | JUNE 15 | 2023 | | | | | | | |
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