# 123 000 279 H8H

(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:

Office Use Only



900409733249

07/14/23--01004--003 \*\*25.00

LLAHASSEE, FLOR

RECEIVED

#### **COVER LETTER**

t i

TO:

TO: Registration Se Division of Cor			
	CARPENTRY AND DESIGN	LLC	
SUBJECT:		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:	
	MARCUS COLLINS		
		Name of Person	
	COLLINS CARPENTRY	AND DESIGN, LLC	
		Firm/Company	
	1433 WATERVIEW RIDG	GE CIRCLE	727
		Address	
	APOPKA, FL 32703		•
		City/State and Zip Code	
	COLLINSCD22@GMAIL.		
	E-mail address: (	to be used for future annual report notification	on)
For further information o	oncerning this matter, please ca	all:	****
MARCUS COLLINS		407 9278106 at ( )	
Name o	f Person		ephone 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration		Street Address: Registration Section	n
Division of C	Corporations	Division of Corpora	ations
P.O. Box 632		The Centre of Talla	
Tallahassee,	FL 32314	2415 N. Monroe Str	icci, suite atv

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLLINS CAPENTRY AND DE	SIGN, LLC		
(Name of the Lim	ited Liability Com (A Florida Limite	pany as it now appears on d Liability Company)	our records.)
The Articles of Organization for this Limited I	Liability Compar	y were filed on JUNE !	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited lia	bility company here:	
COLLINS CARPENTRY AND DESIGN, LLC			
The new name must be distinguishable and contain the	words "Limited Lia	bility Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	
Principal office address MUST BE A STRE	ET ADDRESS)	<del></del>	
			769
Enter new mailing address, if applicable:		N/A	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			· · ·
<ol> <li>If amending the registered agent and/or agent and/or the new registered office address</li> </ol>		e address on our recor	ds, enter the name of the new register
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida s	treet address
			, Florida
		City	Zip 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>	<u>Address</u>	Type of Action
AMBR	CHRISTY COLLINS	1433 WATERVIEW RIDGE CIRCLE	
		APOPKA, FLORIDA 32703	□Remove
			□ Change
	<del> </del>		🗀 Add
			□ Remove
			Change
			□Add
			Remove
			Change
			Add
			Remove
			Change
	<del></del>	<del></del>	□Add
			Change
			🗀 Add
		·	□ Remove
			□ Change

	<u></u>
	~2
	· · ·
	<u>-</u>
ctive date, if other than the date of filing:	(optional)
: If the date inserted in this block does not meet the app	ior to date of filing or more than 90 days after filing.) Pursuant to 605. licable statutory filing requirements, this date will not be liste
ment's effective date on the Department of State's record	ds.
ord englifies a deleved affective data, but not an affective	e time, at 12:01 a.m. on the earlier of: (b) The 90th day after
filed.	; time, at 12.01 a.m. on the earner of: (b) The 90th day after
NU V II	
d JULY 11 , 2023	
(4)	



## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 14, 2023

PORT RICHEY, FL 34668 7510 BRICHWOOD DR PORT RICHEY, FL 34668

Regulatory Specialist II Division of Corporations

SHANTELL BROWN

Re: Document Number L23000114681

The Articles of Amendment to the Articles of Organization for DAN THE WHEEL MAN LLC, a Florida limited liability company, were filed on July 14, 2023.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Section.

Letter Number: 423A00015629

gro.xidnus.www