L23 000 395915

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
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Special Instruction	s to Filing Officer:	<u> </u>
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	Office Use Only	



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(10/22/2023

COVER LETTER

TO: Registration Division of C	Section Corporations		
SUBJECT: C	nief Mobile Name of L	Auto LLC	
The enclosed Articles	of Amendment and fee(s) are s	ubmitted for filing.	
Please return all corres	pondence concerning this matt	er to the following:	
	Reginalo	Chin Name of Person	
	Chief M	lobile Auto Firm/Company	LLC
	3325 3	3rd Way	
	West Palm	Beach, FL City/State and Zip Code	33407
For further information of	E-mail address:	auto Camail. C (to be used for futur annual report not	OM iffication)
Reginald Name of	Chin f Person	at (754) 242	- 9160 ne Telephone Number
Enclosed is a check for th	ne 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 S	ection	Street Address: Registration Sec	
Division of Co P.O. Box 632	orporations 7	Division of Con	porations
Tallahassee, F		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

38

Chief Mobile A	uto LLC 2023 OCT 16 PHIZ:
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000395915</u> .	were filed on $08 - 23 - 2023$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	
The new name must be distinguishable and conteined words "Limited Liab	
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	N/A
New Registered Office Address:	Enter Florida street address

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

manending 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

Title Name Address Type of Action

AMBR Bianca Loopez 2630 W Roward Blyd Madd

Title	<u>Name</u>	Address	Type of Action
AMBR	Bianca Lopez	2630 W Broward Blv	d XAdd
		Suite 203-1231	□Remove
		Ft. Lauderdale, FL 33312	_ □Change
			🗆 Add
	•		□Remove
			□Change
			_ □Add
			_ □Remove
			_ 🗆 Change
			_□Add
	·		_ □Remove
			_ 🗆 Change
			_□Add
			_□Remove
			 □Change
	•		□Add
			□Remove
	-		□ Change

	<u>-</u>
	I cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. neet the applicable statutory filing requirements, this date will not be liste
ecord specifies a delayed effective date, but not is filed.	an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
ted ADVEL OCTOBER 10th	2023
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fignature of a r	member or authorized representative of a member
000:0011	inclined of authorated representative of a memoria