L23000429218

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Satity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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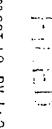
Office Use Only



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COVER LETTER

	OMS LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	PK CUSTOMS LLC Name of Limited Liability Company and Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: PHILLIP L PETRY Name of Person PK CUSTOMS LLC Firm/Company 1724 OPEN FIELD LOOP Address BRANDON, FLORIDA 33510 City/State and Zip Code PKCUSTOMSFLA@AOL.COM E-mail address: (to be used for future annual report notification) Information concerning this matter, please call: PETRY Name of Person Area Code Daytime Telephone Number a check for the following amount: Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Street Address: gistration Section		
		· ·	
	PHILLIP L PETRY		
		Name of Person	
	Name of Limited Liability Company ed Articles of Amendment and fec(s) are submitted for filing. m all correspondence concerning this matter to the following: PHILLIP L PETRY Name of Person PK CUSTOMS LLC Firm/Company 1724 OPEN FIELD LOOP Address BRANDON, FLORIDA 33510 City/State and Zip Code PKCUSTOMSFLA@AOL.COM E-mail address: (to be used for future annual report notification) information concerning this matter, please call: PETRY Name of Person 1813 416-0288 Area Code Daytime Telephone Number a check for the following amount: Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) alting Address: Egistration Section Registration Section		
		Firm/Company	·
	1724 OPEN FIELD LOOP	p	
		Address	
	BRANDON, FLORIDA 3	3510	
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	-		
	E-mail address: (to be used for future annual report not	ification)
For further information of	oncerning this matter, please o	all:	
PHILLIP L. PETRY			
Name o	f Person		ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Address			ction
		Division of Cor	
P.O. Box 632	7	The Centre of T	Tallahassee
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PK CUSTOMS LLC		
(<u>Name of the Limited Liability Co</u> r (A Florida Limit	mpany as it now appears on our record ted Liability Company)	<u> s_</u>)
he Articles of Organization for this Limited Liability Compa	any were filed on	and assigned
lorida document number L23000429218		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited l	iability company here:	
he new name must be distinguishable and contain the words "Limited L	iability 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)	2023 00
		<u> </u>
		<u></u> 1
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		ا مسید. استوران استوران
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	<u> </u>	
3. If amending the registered agent and/or registered offi- gent and/or the new registered office address here:	ce address on our records, enter	the name of the new regist
Name of New Registered Agent:		.,
New Registered Office Address:	Enter Florida street addres.	\$
	FR	orida
	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>	Address	Type of Action
AMBR	PHILLIP L. PETRY	1724 OPEN FIELD LOOP BRANDON, FL. 3351	0 ≡ Add
			□Remove
	\.		□Change
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ecord s	specifies a de l.	layed effec	tive date, b	out not an	effective	time, at 1	2:01 a.m.	on the ear	lier of: (b) The 9	Oth day afi	er the
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arcu			4									
			Signatur	e of a mer	nber or au	thorized rep	resentative	of a mem	er			

Date of this notice: 09-27-2023

Employer Identification Number:

93-3620662

Form: SS-4

Number of this notice: CP 575 G

PK CUSTOMS LLC
PK CUSTOMS
% PHILLIP L PETRY SOLE MBR
1724 OPEN FIELD LOOP
BRANDON, FL 33510

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 93-3620662. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- Refer to this EIN on your tax-related correspondence and documents.
- Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is PKCU. You will need to provide this information along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.

Keep this part for your records.

CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 09-27-2023

EMPLOYER IDENTIFICATION NUMBER: 93-3620662

FORM: SS-4

NOBOD

INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023

PK CUSTOMS LLC PK CUSTOMS % PHILLIP L PETRY SOLE MBR 1724 OPEN FIELD LOOP BRANDON, FL 33510