# 123000458103

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### COVER LETTER

## Ana's Auto Plaza, 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: David Rodriguez Name of Person Firm/Company 16436 Caju Rd Address Clermont, FL 34711 City/State and Zip Code David@anasautoplaza.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 7509110 David Rodriguez 321 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, ■ \$25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address:

TO:

Registration Section Division of Corporations

Registration Section **Division of Corporations** P.O. Box 6327 Taliahassee, FL 32314

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

# ARTICLES OF AMENDMENT TO

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ARTICLES OF O		)23 DCT 13
Ana's Auto Plaza, LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	72 122 5 5 and assigned
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000458103</u> .	were filed on	and assigned
This amendment is submitted to amend the following:		
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 Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	11788 Boggy Creek Road, Lot 3 Suite	e B
(Principal office address MUST BE A STREET ADDRESS)	Orlando, Fl. 32824	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the na	ame of the new registered
Name of New Registered Agent:  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.

Cin

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	Anahiz Rodriguez	13506 SUMMERPORT VILLAGE PKWY, STE. 77	8 □ Add
		Windermere, FL 34786	<b>≡</b> Remove
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<b>fective date, if other than the date of filin</b> an effective date is listed, the date must be specific anote: If the date inserted in this block does not becument's effective date on the Department of S	cannot be prior to date of filing or more than 90 days after filing.) Pursuateet the applicable statutory filing requirements, this date will no	ant to 605.02 ot be listed
e record specifies a delayed effective of The 90th day after the record is filed.	ate, but not an effective time, at 12:01 a.m. on the	e earlier
ated October 10	2023	
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