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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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ALLAHASSEE, FLORIDA

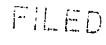
2024 JAN 31 AM 11: 32

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COVER LETTER

	ision of Cor						
SUBJECT:	MUSCLE AUTO CUSTOMIZING AND SALES LLC						
SUBJECT.		Name of Limited Liability Company					
The enclosed	i Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		YOHNATHAN ARIAS					
			Name of Person				
		MUSCLE AUTO CUSTOMIZING AND SALES LLC Firm/Company					
			Firm/Company				
•	9311 SOUTH ORANGE AVE						
			Address				
	ORLANDO, FLORIDA 322824						
			City/State and Zip Code	····			
		JYBBODYSHOP@GMAII					
			to be used for future annual report not	ification)			
For further u	nformation c	oncerning this matter, please co	all:				
YOHNATH	AN ARIAS		407 693-5902 at ()				
 -	Name o	f Person	Area Code Daytin	E Telephone Number			
Enclosed is a	check for th	e following amount:					
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)			
	iling Addres		Street Address:	ation			
Registration Section Division of Corporations			Registration Section Division of Corporations				
P.C	D. Box 632	7	The Centre of	Tallahassee			
Tal	lahassee, I	L 32314	2415 N. Monro Tallahassee, Fi	e Street, Suite 810 2 32303			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



2024 JAN 31 AH 11: 32

(Name of the Limited Liability Company as it now appears on our records.)

		TACCAHASSEE, FLORIDA
The Articles of Organization for this Limited Liability (Florida document number	Company were filed on 11/07/20	23 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
MUSCLE AUTO CUSTOMIZING AND SALES LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designat	nion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registere	ed office address on our record	s, enter the name of the new regi
agent and/or the new registered office address here: ,		
Name of New Registered Agent: New Registered Office Address:	Enter Florida str.	eet address
Name of New Registered Agent: New Registered Office Address:		
Name of New Registered Agent: New Registered Office Address:		eet address , Florida Zip Code

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 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>	Name	Address	Type of Action
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Effective date, if other than the date of filling: (optional) (if an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020 Motes; if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the rd is filed. Young Land Alia Signature of a member of authorized representative of a member YOHNATHAN ARIAS CARRASQUEL						
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Filing Fee: \$25.00