L23000525282

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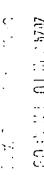
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COVER LETTER

TO: Registration Se Division of Cor			
MULTI TI SUBJECT:	RES LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MIGUEL CASTELLANC	os	
		Name of Person	····
	MULTI TIRES LLC		
		Firm/Company	
	6810 N ORANGE BLOSS	SOM TRAIL	
		Address	
	ORLANDO FLORIDA 32	2810	
		City/State and Zip Code	
	multitiresllc@hotmail.com E-mail address: 0	to be used for future annual report notifi	ication)
For further information of	oncerning this matter, please c	·	
MIGUEL CASTELLAN	OS	407 2470020	
Name of Person		at () Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		(2)
■ \$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 5 Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations ıllahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MULTI TIRES LLC

	rionga Limiled i	iny as it now appears (Liability Company)		
The Articles of Organization for this Limited Liabi	lity Company	were filed on 11/22	2/2023	and assigned
Florida document number L23000525282	·			
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liab	ility company hero	2:	
N/A				
he new name must be distinguishable and contain the words	s "Limited Liabi	lity Company," the desi	gnation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	N/A		
Principal office address MUST BE A STREET ADDRESS)		N/A		
				
Inter new mailing address, if applicable:		N/A		
Mailing address MAY BE A POST OFFICE BOX)		N/A		
			· · · · · · · · · · · · · · · · · · ·	
3. If amending the registered agent and/or regis gent and/or the new registered office address h	stered office : ere:	address on our rec	ords, <u>enter the nar</u>	ne of the new registere
gent and/or the new registered office address h	stered office : ere: N/A	address on our rec	ords, <u>enter the nar</u>	ne of the new registere
Name of New Registered Agent:	<u>ere</u> :	address on our rec	ords, <u>enter the nar</u>	ne of the new registere
Name of New Registered Agent:	<u>ere</u> : N/A		ords, enter the nar	ne of the new registere
Name of New Registered Agent:	<u>ere</u> : N/A		ı street address	
Name of New Registered Agent:	<u>ere</u> : N/A			
gent and/or the new registered office address have a Name of New Registered Agent:	ere: N/A N/A	Enter Florida	ı street address	

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	LUIS M CASTELLANOS	6810 N, ORANGE BLOSSOM TRAIL ORLANDO	Fl ≣Add
			□Remove
			□Change
	 _		□Add
			□Remove
			[]Change
			□Add
			□Remove
			□Change
 ,			□Add
			□Remove
			C]Change
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Effectiv	e date, if other than the date of filing:
f an effec Note: I	e date, if other than the date of filing: (optional) tive 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 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a
docume	nt's effective date on the Department of State's records.
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 file	1.
	06-05 2024
Dated _	$\frac{100 \times 100}{100} \cdot \frac{2029}{100} \cdot \frac{1}{100} \cdot \frac{1}{$
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member MIGUEL CASTELLANOS

Filing Fee: \$25.00