

L 24 0000 26888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

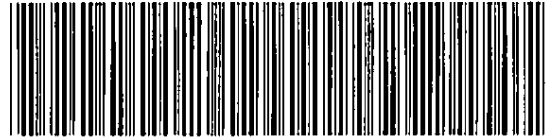
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700423414987

02/16/24--01029--003 \*\*30.00

FILED

2024 FEB 16 PM 12:15

CLERK OF STATE  
TALLAHASSEE, FL

Handwritten signature

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: STILL LOWRIDING CAR CLUB LLC

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:

ROLANDO GONZALEZ

Name of Person

STILL LOWRIDING CAR CLUB, LLC

Firm/Company

3304 BUNKER HILL STREET

Address

PORT CHARLOTTE, FL 33948

City/State and Zip Code

DJSELLSRE@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROLANDO GONZALEZ

941

628-1514

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

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

**Street Address:**

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

RECEIVED  
TALLAHASSEE, FL

2024 FEB 16 PM 12:15

FILED

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

STILL LOWRIDING CAR CLUB, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 1/11/2024 and assigned  
Florida document number L24000026888

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability 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)**

2521 33RD AVENUE DRIVE E

BRADENTON, FL 34208

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2521 33RD AVENUE DRIVE E

BRADENTON, FL 34208

**FILED**  
2024 FEB 16 PM 12:15  
CLERK OF STATE  
TALLAHASSEE, FL

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

JUAN ALEJANDROS OLIVARES

New Registered Office Address:

2521 33RD AVENUE DRIVE E

Enter Florida street address

BRADENTON

City

Florida 34208

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	JUAN ALEJANDRO OLIVARES	2521 33RD AVENUE DRIVE E	<input checked="" type="checkbox"/> Add
		BRADENTON, FL 34208	<input type="checkbox"/> Remove
		PRESIDENT	<input type="checkbox"/> Change
MGR	EDUARDO GARCIA ARENALES	4509 30TH STREET CIRCLE EAST	<input checked="" type="checkbox"/> Add
		BRADENTON, FL 34203	<input type="checkbox"/> Remove
		VICE PRESIDENT	<input type="checkbox"/> Change
MGR	TRAVIS SANCHEZ	1212 51ST STREET AVENUE EAST	<input checked="" type="checkbox"/> Add
		BRADENTON, FL 34203	<input type="checkbox"/> Remove
		SECRETARY	<input checked="" type="checkbox"/> Change
MGR	ROLANDO GONZALEZ	3304 BUNKER HILL STREET	<input type="checkbox"/> Add
		PORT CHARLOTTE FL 33948	<input checked="" type="checkbox"/> Remove
		PRESIDENT	<input type="checkbox"/> Change
MGR	DIANA GONZALEZ	3304 BUNKER HILL STREET	<input type="checkbox"/> Add
		PORT CHARLOTTE FL 33948	<input checked="" type="checkbox"/> Remove
		TREASURER	<input type="checkbox"/> Change
MGR	CHRISTIMA BLANTON	307 NE 11TH AVENUE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33909	<input checked="" type="checkbox"/> Remove
		SECRETARY	<input type="checkbox"/> Change

FILED  
2024 FEB 16 PM 3:15  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FL

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

EMAIL IS CHANGE TO : CHIEFS15AFC@ICLOUD.COM

NEW PHONE NUMBER : 956-431-9769

2024 FEB 16 PM 12:15  
DEPT OF STATE  
TALLAHASSEE, FL

FILED

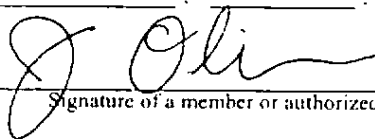
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the 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 record is filed.

Dated JANUARY 29 2024



Signature of a member or authorized representative of a member

JUAN ALEJANDRO OLIVARES

Typed or printed name of signee

Filing Fee: \$25.00