

L24000046492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

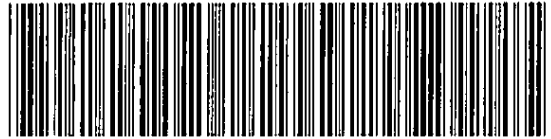
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800423408048

02/12/24--01017--009 **25.00

KH
02/27/24

2024 FEB 12 PM 8:46
STATE
CLERK

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fenix Auto Solution UC
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:

Yusniel Matos Rosales
Name of Person
Fenix Auto Solution UC
Firm/Company
11050 State Rd 52
Address
Hudson, FL 34669
City/State and Zip Code
yusnielmatos2002@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yusniel Matos Rosales at (813) 458 2267
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

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

Fenix Auto Solutions 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 01/24/2024 and assigned Florida document number L24000046492.

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)

11050 State Rd 52
Hudson, FL 34669

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2865 NE 7th St Apt D
Ocala, FL 34470

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:

Yusniel Matos Rosales

New Registered Office Address:

2865 NE 7th St Apt D

Enter Florida street address

Ocala

City

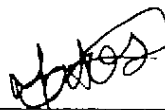
Florida

34470

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

AMBR Yusniel Matos Rosales 2865 NE 7th St AptD ☐ Add
Ocala, FL 34470 ☐ Remove

_____ ☐ Add

[Remove](#)

_____ ☐ Change

_____ ☐ Add

 Remove

_____ ☐ Change

_____ Add

[Remove](#)

_____ ☐ Change

_____ ☐ Add

[Remove](#)

_____ ☐ Change

_____ ☐ Add

[Remove](#)

_____ ☐ Change

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

Primary Address And name of AMBR

2024 FEB 12 AM 8:47

STATE

2024 FEB 12 AM 8:47

STATE

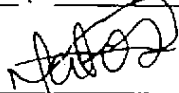
E. Effective date, if other than the date of filing: _____ (optional)

(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 February 6, 2024



Signature of a member or authorized representative of a member

Yosniel Matos Rosales

Typed or printed name of signee