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COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co			
SUBJECT: PANTHE	RS CAR WASH DETAILERS.	LLC	
Sobole 1.		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	- SELE
Please return all corresp	ondence concerning this matter	to the following: /N THE	PRE PRINTED SELF ANDRESSED ENTEMPE:
	Jonathan D. Louis		
		Name of Person	
	Jonathan D. Louis PA		
	John D. Bons (7)	Firm/Company	
	7777 Chudan Danid Culin d	02	
	7777 Glades Road, Suite 4	Address	
			v
	Boca Raton, FL 33434	Civi/See- and 71- Code	
	jlouis@jonathanlouislaw.co	City/State and Zip Code	• -
	• •	to be used for future annual report notif	ication)
For further information	concerning this matter, please ca	all:	
Jonathan Louis			
 	of Person	Area Code Daytime	: Telephone Number
		at (561) 314-4780 Area Code Daytime	1988 (Cerl)
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of P.O. Box 63	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PANTHERS CAR WASH DETAILERS, LLC		
(Name of the Limited Liability (A Florida I	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on June 18, 2024	and assigned
Florida document number L24000275391	<u>_</u> '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the	name of the new regist
gent and of the new registered office address here.		
Name of New Registered Agent:		رين
Hame of New Registered Agent.		
New Registered Office Address:	Face Florida and H	
	Enter Florida street address	
	, Florid	
	City	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>	Address	Type of Action
AMBR	MURCIA TORO, ANDRES D	7434 CAMPO FLORIDO	□ Add
		BOCA RATON, FL 33433	≣Remove
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ective date, if other than n effective date is listed, the date te: If the date inserted in the cument's effective date on the	e must be specific and his block does not n	l cannot be prior to oneet the applicabl	late of filing or more that e statutory filing requ	(optional) n 90 days after filing.) P irements, this date wi	ursuant to 605.020 Il not be listed a
ecord specifies a delayed ef s filed.	Fective date, but not	an effective time	, at 12:01 a.m. on the	earlier of: (b) The 9	Oth day after the
acd August 8	•	2024	rania)		
		سلامليهن با	I CHATLY		
<u> </u>	Signature of a r	member or authoriz	ed representative of a m	ember	

Filing Fee: \$25.00