## L24000344249

(Re	equestor's Name)	<u> </u>
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
	dress)	· · ·
	·	
(Cit	y/State/Zip/Phoni	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	-
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer.	
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08/15/24--01012--024 \*\*25.00



## **COVER LETTER**

TO: Registration S Division of Co			
EXCLUSI SUBJECT:	VE MOBILE WINDOW TINT	ING LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jared Christian Baez		
		Name of Person	
	EXCLUSIVE MOBILE W	INDOW TINTING LLC	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	7593 PINE LAKES BLVI	D	
		Address	
	PORT ST LUCIE 34952		
	<del> </del>	City/State and Zip Code	<del></del>
	exclusive.windowtinting.n	<del>-</del>	
	E-mail address: (	to be used for future annual report no	tification)
For further information of	concerning this matter, please c	all:	
Jared Christian Baez		772 999-8286 at ( )	
Name o	of Person		ne Telephone Number
Enclosed is a check for t	he 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 Addres		Street Address: Registration Se	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limite</u> (	d Liability Comp A Florida Limited	any as it now appears on our i Liability Company)	records.)
The Articles of Organization for this Limited Lia Florida document number L24000344249	ability Company	were filed on $\frac{08/05/2024}{}$	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liah	oility company here:	
The new name must be distinguishable and contain the wo	only of incident 12 often	Tay Comment and the state of	MILON A IL COMPANION
		7593 PINE LAKES BLVI	
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		PORT ST LUCIE 34952	
Trucipul office unures WOST DE A STREET	ADDRESS)		. 1
			· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		7593 PINE LAKES BLVI	; )
Mailing address MAY BE A POST OFFICE B	eox)	PORT ST LUCIE 34952	
			:
<ol> <li>If amending the registered agent and/or regent and/or the new registered office address</li> </ol>	gistered office : here:	address on our records, <u>e</u>	nter the name of the new regis
Name of New Registered Agent:	Jared Christia	n Baez	
New Registered Office Address:	7593 Pine Lake	s Blvd	
		Enter Florida street a	ddress
	Port St Lucie		_, Florida <u>3</u> 4952
		Ciţy	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

EXCLUSIVE MOBILE WINDOW TINTING LLC

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
MGR	Jared Christian Baez	7593 Pine Lakes Blvd Port St Lucie 34952	🖹 Add
			□ Remove
			□Change
		□Add	
		ПРетюче	
		□Change	
		🗀 Add	
		ПРЕМОУС	
		□Change	
		□Add	
			Пспюче
		□Change	
		□Add	
		□Remove	
		□Change	
			□Add
			□Remove
			Change

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	8/12/2024
Effect	ve date, if other than the date of filing:
Note:	ective date is fisted, 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), If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the recor	d 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 ed.
Dated	3/12/2024
	•
	James Danny
	Signature of a member or authorized representative of a member

Typed or printed name of signee