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Division of Corporations

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From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MONKEYTIRES SHOP LLC

Certificate of Status	0
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To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MONKEY TIRES SHOP LLC	1.106.72		ands )		
(A f	inbility Company as it no lorida Limited Liability C	ompuny)	:0rus.)		
The Articles of Organization for this Limited Liabil Florida document number <u>L24000488135</u>	lity Company were file	ed on <u>11-20-2024</u>		and assigne	ed
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liability con	ipany here:			
The new name must be distinguishable and contain the words	"Limited Liability Compt	any," the designation "l	LLC" or the abbrevi	ation "L.L.C.	,,
Enter new principal offices address, if applicable	e:	· · · · · · · · · · · · · · · · · · ·	<del>-</del>	~~	
(Principal office address MUST BE A STREET A	DDRESS)		:-	2025 MAR 14	
			<u> </u>	K. X	-T1
			; ·	· =	<del></del>
Enter new mailing address, if applicable:				<u></u>	(T)
(Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>			<u>s</u>	
				<del></del>	
B. If amending the registered agent and/or regis	stered office address	on our records, en	ter the name of	th <u>e new re</u>	gisterec
agent and/or the new registered office address h	ere:	· <del>_</del>			
Name of New Registered Agent:	·····				
New Registered Office Address:					
•		Enter Florida street ad	dress		
			Florida	<del></del>	
	City		Z	ip Code	
New Registered Agent's Signature, if changing Regi	stered 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

From: Yanet Avila

MGR = Manager AMBR = Authorized Member

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MEREDITH A BUTLER	21 PARRISH WAY	CIAdd
		WEST BARNSTABLE, MA 022668	
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Effective date, if other than if an effective date is listed, the date Note: If the date inserted in the document's effective date on the	is block does not meet	t the applicable stat	filing or more than 90 da utory filing requiremen	ys after filing.) Pursuant to ats, this date will not be	605.0207 listed as
e record specifies a delayed efferd is filed.	ective date, but not an	effective time, at 17	2:01 a.m. on the earlier	of: (b) The 90th day a	after the
Dated MARCH 13TH		2025			
ok .					
Laura Lijiang Gé,r az Pacheco	(Mar 13, 2025 14.03 ECT) Signature of a mem	nber or authorized ren	resentative of a member		-
	<del>"</del>	•	·		
	LAURA LI	ILIANA GOME	Z PACHECO		
	Tyr	ped or printed name o	of signee		-