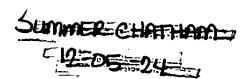
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Free amendment due
to examiner error
5.c.
17/05/24



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Office Use Only

COVER LETTER

TO: Registration Se Division of Cor				
Supreme of	letailing Ilc			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Brian Hellman			
		Name of Person		
		Firm Company		
	208 Pioneer Village Dr.			
		Address		
	Ponte vedra FL 32081			
	Currence 0.000@gmail.com	City/State and Zip Code		
	Supreme0898@gmail.col E-mail address: (to be used for future annual report not	ification)	
For further information of	concerning this matter, please c	all:		
Brian Hellman		954 9522995 at ()		
Name (of Person	Area Code Daytin	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 cadditional copy is enclosed)	
<u>Mailing Addre</u> Registration		Street Address: Registration Se	ection	
Division of C	Corporations	Division of Co	orporations	
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Supreme detailing IIc		
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records ted Liability Company)	<u>,</u>)
The Articles of Organization for this Limited Liability Compa	any were filed on 12/2/2024	and assigned
lorida document number L24000500334		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited I	iability company here:	
Supreme Detailing of FL LLC		_
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC"	or the abbreviation "L.L.C."
inter new principal offices address, if applicable:		ECRE
<u>Principal office address MUST BE A STREET ADDRESS</u>	<u> </u>	
	- <u></u>	500 A 111
inter new mailing address, if applicable:		S S S
Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or registered offigent and/or the new registered office address here: 	ice address on our records, <u>enter</u>	the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	î
		orida Zip Code
	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 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
		·	
			□Change
			□Add
			ZOZETOVE DE CONTROVE
			SECRETARY OF THANS
			S THANGE TO Add
			ਾਂ ਹੈ □Remove
			□Change
			□Add
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			Change
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			□Remove
		•	□Change
			□Add
			□Remove
			□ Change

Effective date, if other than the date of filing: 12/2/2024	ctive date, if other than the date of filing: (uptional)				
ffective date, if other than the date of filing: 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 605.0 dote; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occument's effective date on the Department of State's records. 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 filed. December 5th 2024	ctive date, if other than the date of filing: 12/2/2024 (optional) 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 If the date inserted in this block does not meet the applicable stratutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records. ord 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 filed. December 5th 2024 Signature of a member or authorized representative of a member Brian Hellman				
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Signature of a member or authorized representative of a member	Brian Hellman				
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Filing Fee: \$25.00