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Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Address:		
	Address:	Address:

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

## CALIBER BODYWORKS OF FLORIDA LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

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AUG 2 4 2023

K. Brumbley

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

State: Caliber Bodyworks of Florida LLC		
Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADDRESS)	2941 Lake Vista Drive	<del></del>
	Lewisville, TX 75067	
Enter new mailing address, if applicable: (Mailing address)		<del></del>
MAY BE A POST OFFICE BOX)	2941 Lake Vista Drive	
	Lewisville, TX 75067	202
2. The Florida document number of this limited li	iability company is: <u>M200000177</u>	2023 AUG
Jurisdiction of its organization:Delaware		321
4. Date authorized to do business in Florida:02/13/2020		
SECTION II (5-9 complete only the applicable	e changes)	# E
5. New name of the limited liability company:(mu	ist contain "Limited Liability Company, " "L.I	元C.," or "LLC.")
copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L. 6. If amending the registered agent and/or register	anaging members adopting the alternate name .C." or "LL.C.")  red officer address on our records, enter the na	orida and attach a. The alternate name
copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.  6. If amending the registered agent and/or register registered agent and/or the new registered office a	anaging members adopting the alternate name (.C." or "LL.C.")  red officer address on our records, enter the name address here:	orida and attach a. The alternate name
copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.  6. If amending the registered agent and/or register registered agent and/or the new registered office a Name of New Registered Agent:	anaging members adopting the alternate name (C." or "i.L.C.")  red officer address on our records, enter the name address here:	orida and attach a . The alternate name ame of the new
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(If name unavailable, enter alternate name adopte copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L. 6. If amending the registered agent and/or register registered agent and/or the new registered office a Name of New Registered Agent:  New Registered Office Address:	anaging members adopting the alternate name (C." or "i.L.C.")  red officer address on our records, enter the name address here:	orida and attach a . The alternate name ame of the new

itle/ Capacity	<u>Name</u>	Address Tyr	e of Actio
resident	Mark Sanders	2941 Lake Vista Dr. Lewisville, TX, 75067	□Add
			■Remo
resident	Judd Nystrom	2941 Lake Vista Dr. Lewisville, TX, 75067	⊠Adđ
			□Remo
<del></del> _		2941 Lake Vista Dr. Lewisville, TX, 75067	□Add
			□Remo
- <del></del>		2941 Lake Visia Dr, Lewisville, TX, 75067	ШAdd
		□Remo	
		⊏Add	
ator <b>e</b> mentione	certificate, if required; no more and amendment(s), duly authenticater the law of which this entity	than 90 days old, evidencing the acted by the official having custody of records in the is organized.	□Remo
		ture of the authorized representative	

Fifing Fee: \$25.00