

2/20/25 4:12 PM

Division of Corporations

L25000046213  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383  
From: Account Name : DOSSANTOS AND MACHADO, LLC  
Account Number : I20140000089  
Phone : (754)301-2128  
Fax Number : (954)252-4650

FILED  
2025 FEB 20 PM 4:05  
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

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

Email Address: INFO@GFSTAXACCT.COM

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2025 FEB 20 PM 4:28  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BLESSING AUTO MECHANIC LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

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FEB 21 2025

### COVER LETTER

((H25000065842 3))

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BLESSING AUTO MECHANIC LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GILVAM F DOS SANTOS  
Name of Person

GFS TAX & ACCOUNTING SERVICES  
Firm/Company

11764 W SAMPLE RD - STE 102  
Address

CORAL SPRINGS, FL 33065  
City/State and Zip Code

INFO@GFSTAXACCT.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GILVAM F DOS SANTOS at (754) 268 6771  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:**  
 Registration Section  
 Division of Corporations  
 P.O. Box 6327  
 Tallahassee, FL 32314

**Street Address:**  
 Registration Section  
 Division of Corporations  
 The Centre of Tallahassee  
 2415 N. Monroe Street, Suite 810  
 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H25000065842 3)))

FILED 2025 FEB 20 PM 11:05

BLESSING AUTO MECHANIC LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/04/2025 and assigned Florida document number L25000046213

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1241 N DIXIE HWY - STE 12

(Principal office address MUST BE A STREET ADDRESS)

Pompano Beach, FL 33060

Enter new mailing address, if applicable:

1241 N DIXIE HWY - STE 12

(Mailing address MAY BE A POST OFFICE BOX)

Pompano Beach, FL 33060

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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:**

(((H25000065842 3)))

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	NILSON LEON DE JESUS	22823 SW 56TH AVE	<input type="checkbox"/> Add
		BOCA RATON, FL 33433	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	CARLOS JUNIO ALVES DE OLIVEIRA	4407 NW 3RD TER	<input type="checkbox"/> Add
		DEERFIELD BEACH, FL 33064	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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 TALLAHASSEE, FL 32399

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 DEPT. OF STATE

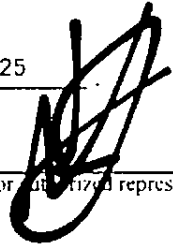
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the 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 record is filed.

Dated February, 20th 2025



Signature of a member or authorized representative of a member

NILSON LEON DE JESUS

Typed or printed name of signee