L07000113110

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					

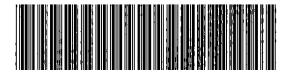
Special Instructions to Filing Officer:

A. LUNT

DEC -7 2010

EXAMINER

Office Use Only



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12/06/10--01023--011 **60.00

2010 DEC -6 AM III: 24
SECRETARY OF STATE
PALLAHASSEE FIRSTER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	GT-	4WD, LLC.			
	Name of Lim	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are su	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Cesar A. Ponce			
		Name of Person			
	Imr	nigration Services, LLC.			
		Firm/Company			
	4005	4005 NW 114th. Ave. Suite 24			
		Address		2010 DEC	
		Doral, FL 33178	ぶ い い で で で で で で で で で で で で で で で で で	A2年 9-3	
		City/State and Zip Code			in
	E-mail address: (Dimmigrationservices (c.com to be used for future annual report notifica	tion)		
For further information	concerning this matter, please of	all:	<u> </u>	AMIII: 24	
	esar A. Ponce		18-8813		
Name	of Person	Area Code & Daytime T	'elephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	✓ \$60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is		

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

, LLC.			
ny as it now appear liability Company)	s on our records.)		
were filed on	11/08/2007	and assigned	
ility company her	e:		
ted Liability Compa	ny," the designation	"LLC" or the abbreviation	
8956 NW 24tl	n. Terrace		
Doral, FL 331	72		
		SS	
		<u> इस</u> 2	
ice address on o	ur records, <u>enter</u>	the name of the new	
·····			
Enter Florida street address			
, Florida		Zip Code	
	were filed on idity Company here ted Liability Company 8956 NW 24th Doral, FL 331	ility company here: ted Liability Company," the designation and selection are selection and selection and selection and selection are selection and selection are selection as selection and selection are selection and selection are selection as selection and selection are selection as selection are selection as selection and selection are selection as selection and selection are selection as selection are selection are selection are selection are selection as selection are sele	

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 608, 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

amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager Managing Member being added or removed from our records:

MGR = Manager ' MGRM = Managing Member **Title** Name 1 **Address Type of Action MGRM** Eduardo Echeverria ✓ Add
☐ Remove 8956 NW 24th Terrace Doral, FL 33172 MGRM Raul Leoni 8956 NW 24th Terrace **✓** Add ☐ Remove Doral FL 33172 MGRM Balleza Export, LLC. 8956 NW 24th Terrace √ Add Doral, FL 33172 ☐ Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 08 Dated __ Signature of a member or authorized representative of a member

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00