

1 D8000014609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

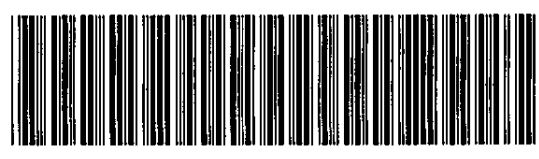
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD
NO OCT 29 2008
EXAMINER



400135512844

10/29/08--01006--007 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
08 OCT 27 PM 1:58



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 8, 2008

YULIANA BOLIVAR
1018 PLAZA DRIVE
KISSIMMEE, FL 34743

SUBJECT: J 2 CAR REPAIR, "LLC"
Ref. Number: L08000014609

We have received your document for J 2 CAR REPAIR, "LLC". However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod
Regulatory Specialist II

Letter Number: 708A00053062

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: J2 CAR REPAIR "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:

YULIANA BOLIVAR
(Name of Person)

F&Y TAX AND SERVICES, INC.
(Firm/Company)

1018 PLAZA DRIVE
(Address)

KISSIMMEE, FLORIDA 34743
(City/State and Zip Code)

For further information concerning this matter, please call:

YULIANA BOLIVAR at (407) 344 0286
(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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

J2 CAR REPAIR, "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 FEBRUARY 08, 2008 and assigned Florida document number L08000014609.

This amendment is submitted to amend the following:

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

N/A

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

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

N/A

N/A

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 OCT 27 PM 1:58

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:

N/A

New Registered Office Address:

N/A

(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 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)

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

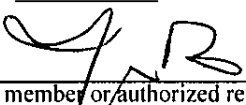
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ASTRID ESTRADA	2209A N.MAIN STREET KISSIMME, FLORIDA 34744	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
N/A	N/A	N/A	<input type="checkbox"/> Add <input type="checkbox"/> Remove
N/A	N/A	N/A	<input type="checkbox"/> Add <input type="checkbox"/> Remove
N/A	N/A	N/A	<input type="checkbox"/> Add <input type="checkbox"/> Remove
N/A	N/A	N/A	<input type="checkbox"/> Add <input type="checkbox"/> Remove
N/A	N/A	N/A	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

N/A
N/A
N/A
N/A
N/A

Dated SEPTEMBER 30, 2008



Signature of a member or authorized representative of a member

YULIANA BOLIVAR

Typed or printed name of signee