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Division of Corporations **Electronic Filing Cover Sheet**

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(((H12000217191 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GEOFFREY M. WAYNE, P.A.

Account Number: 076770003401 : (305)381-8108 Phone

Fax Number : (305)381-8109

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

Email	Address:	mfaabo	gado mi	ami.	com	
			}			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN U.E. MACHINERY & PARTS LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

C. LEWIS

AUG 3 1 2012

EXAMINER

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Corporate Filing Menu

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COVER LETTER

Registration Section
Division of Corporations

Division of Co	orporations		H12000217191 3
SUBJECT:	U. E. MACHII	NERY & PARTS LLC	
3010EC1		ited Liability Company	<u></u>
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
	condence concerning this matter	-	
		Maggie Fleagle	·
		Name of Person	
	G	eoffrey M. Wayne P.A.	
		Firm/Company	
	135 Sa	n Lorenzo Avenue, PH 840	
	······································	Address	
	C	oral Gables, FL 33146	
		City/State and Zip Code	
	m	fa abog adomiami.	com
			ation)
For further information	concerning this matter, please of	call:	
М	aggie Fleagle	at (305)	381-8108
Name of Person		at (305) 3 Area Code & Daytime	Telephone 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 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

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U. E. MACHI	NERY & PARTS I	LC	
(Name of the Limited Liability (A Florida L	Company as it now appear mited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Co	mpany were filed on	02/06/09	and assigned
Florida document number L09000012574	_•		
This amendment is submitted to amend the following:		•	
A. If amending name, enter the new name of the limit	ed liability company her	Æ:	
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Compa	my," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			三三
(Principal office address MUST BE A STREET ADDRE	<u></u>		50 6 T
			<u> </u>
Fotom was and the address of any backles			
Enter new mailing address, if applicable:	 ;	 ·	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office addresses	red office address on c ess here:	our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street ada	iress
		, Florida	
	City		Zip Code
Mass Danieland Aranda Classelma if Alamete - Danieland	A		

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 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 = M MGRM =	anager Managing Member	ŀ	112000217191 3
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BIANCA BALDINI	12963 W Okeechobee Rd. Hialeah Gardens, FL 33018	
MGR	MARIANO BARRETO	12963 W Okeechobee Rd. Hialeah Gardens, FL 33018	Add Remove
			Add Remove
	<u> </u>		Add Remove
	<u> </u>		AddRemove
			AddRemove
D. If ame	nding any other information, ent	er change(s) here: (Attach additional sheets, if ne	<u> </u>
			FILED 12 AUG 30 AM SEUTE MASSEE.
Dated	August 27	, <u>2012</u> .	AMIN: 03 EF, FLORIDA
	Geoffen h. L. Signature of	a member or authorized representative of a member	tative
		Geoffrey M. Wayne, Esq. Typed or printed name of signee	

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Filing Fee: \$25.00

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