L15000145688

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2015 SEP 18 A 11: 47 SECRETARY OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

Division of Corporations				
Flomingt SUBJECT:	on Auto & Industrial Parts LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	James Scott Cook			
	**************************************	Name of Person		
		Firm/Company		,
	4726 Geri Street			
		Address		
	Milton, FL 32583			
	homewithjanice@aol.com	City/State and Zip Code	ŠEC TALL,	2015
	E-mail address: (to be used for future annual report notif	ication) LLARE TAS	E GA
For further information	concerning this matter, please c	all:	ARY	SEP 18 /
Janice Cook		850 698-2209 at ()	OF S	
Name	e of Person		Telephone Number	= = 0
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 F Certificate of S Certified Copy (additional copy is	Status & /

MAILING ADDRESS:

TO:

Registration Section

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

Flomington Auto & Industrial Parts 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 August 25, 2015 and assigned Florida document number L15000145688 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Flomaton Auto & Industrial Parts LLC 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) PATE 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

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

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Filing Fee: \$25.00