## L12000109463

(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:
<b>*</b>
FEB = 8 2013
8. TONER

Office Use Only

Dan McLanghlin authorized by phone 2/8/13 to correct new name to be D-MAC USED AUTO PARTS, LLC - SP



100244375261

02/05/13--01031--010 \*\*30.00



## **COVER LETTER**

TO: Registration Sect Division of Corpo			
SUBJECT:	Name of Limite	NUTSTMENT PRODUCTION OF THE PROPERTY OF THE PR	prening, Lee
The enclosed Articles of Ar	mendment and fee(s) are subr	nitted for filing.	
Please return all correspond	dence concerning this matter t	o the following:	
	Dam	Name of Person	
		Firm/Company	,
	<u> 425 1</u>	ONESET SRA	vers (N.
	0	Address	
	$\sum_{i=1}^{n} (x_i)^{i}$	OHAS FL 3	2259
	E-mail address: (to	City/State and Zip Code  City/State and Zip Code  De used for future annual report notification	Brecsour Nreg
For further information con	cerning this matter, please ca	11:	
Name of P	Aucu L. erson	at ( <u>904)</u> <u>626.</u> Area Code & Daytime Tel	6522_ lephone Number
Enclosed is a check for the	Callawing amount		
	. / -	Description in the contract of	
\$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

FILED 13 FEB -5 M 9:40

^		13 110
1) Mac	LNUIES TMENT	PRO DESTINATION
(Name of the Limited Liabili	ty Company as it now appears of Limited Liability Company)	on our records.)
(A FIORIGE	i Limited Liability Company)	i 1
The Articles of Organization for this Limited Liability	Company were filed on	G 1 2012 and assigned
Florida document number	109 463	•
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
		TS. LICI
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company	the designation LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		r records, enter the name of the new
registered agent and/or the new registered office ad-	aress nere.	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	r.	
	Enter	Florida street address
	0:	, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = I	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			Add
		<del></del>	Remove
			Remove
			Add
			Remove
			Remove
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			Add
			Kemove
<del></del>	<del></del>		Add
			Remove

-	
<del> </del>	
	1
-	Dan Medalh
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00