

01000022734

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(Address)

(Address)

(City/State/Zip/Phone #)

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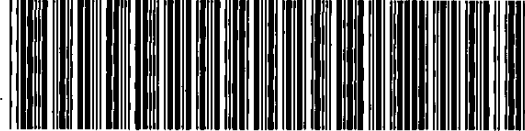
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

01-22734  
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AUTOCARE SERVICES OF TALLAHASSEE, 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:

Shannon Rosier

(Name of Person)

Rosier & Company, PA

(Firm/Company)

1838-B Jaclif Court

(Address)

Tallahassee, FL 32308

(City/State and Zip Code)

For further information concerning this matter, please call:

Shannon Rosier

(Name of Person)

at (

850 ) 877-6362

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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877-6362

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

**AUTOCARE SERVICES OF TALLAHASSEE, LLC**

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 12/28/2001 and assigned  
document number L01000022734.

**SECOND:** This amendment is submitted to amend the following:

Article IV: The registered agent is Shannon Rosier, 1838-B Jaclif Court, Tallahassee, FL 32308

*Shannon Rosier*

Article V: Manager is Robert Simmons, 1703 Capital Cir. NE, Tallahassee, FL 32308

Dated January 1, 2006.

*[Signature]*

Signature of a member or authorized representative of a member

**Robert J. Simmons**

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2006 SEP 11 PM 2:10

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Filing Fee: \$25.00