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SECRETARY OF STATE
TALLAHASSEE, FLORID,

COVER LETTER

TO: Registration Sec Division of Corp	porations
SUBJECT:	HOLLY WOOD MOTOR CARS, LLC Name of Limited Liability Company
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.
Please return all correspon	idence concerning this matter to the following:
	Alan Berliner
	Name of Person
	Hollywood Motorcars, LLC
	Firm/Company
	P O Box 260578
	Address
	Pembroke PinesFl 33026
	City/State and Zip Code
	alanberliner@bellsouth.net E-mail address: (to be used for future annual report notification)
For further information co	ncerning this matter, please call:
Alan Berline	AS T
Name of	
Enclosed is a check for the	e following amount:
□ \$25.00 Filing Fee	Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

Hollywood Motorscars, LLC			
(Name of the Limited L.	ability Company as it now appear lorida Limited Liability Company)	s on our records.)	
(AT	• • • •		
The Articles of Organization for this Limited Liab	oility Company were filed on	4-44-03	and assigned
Florida document number L03000013269		· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company her	<u>e</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	ny," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u> </u>		
		.	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the	name of the new
registered agent and/or the new registered orna	ce address here.	EA.	
Norma of New Decisioned Access		HAS	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	- SE	< Co
New Registered Office Address:		2.70 Th	
	Ent	ter Florida street ad্ট্রার্চ ইট্র	u = 0
		, Florida <u>A</u>	<u> </u>
	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 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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
mgrm	Ashok Vyas	P O Box 260578	Add
		Pembroke Pines FI 3302	6 Remove
mgrm	Alan Berliner	5927 Plunkett St.	Add
		Hollywood, FL 33023	Remove
			Add
			Remove
			Add
			Remove Remove
		E, FLORIDA	A Add Remove
			Add

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<u> </u>	
	
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	,,
	may/Me
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00

