

103000016047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

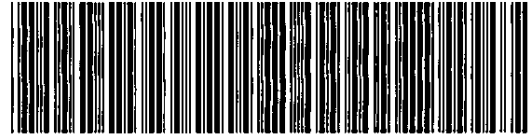
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
10 AUG 30 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
AUG 31 2010
EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Turnkey Auto Sales & Service 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:

Joanne T Cotner

Name of Person

Firm/Company

4829B Palm Beach Blvd

Address

Ft. Myers, FL. 33905

City/State and Zip Code

tammycotner@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joanne T Cotner

Name of Person

at (239)

872-3771

Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 AUG 30 PM 2:00

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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

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

Turnkey Auto Sales & Service 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 5/2/03 and assigned
Florida document number L03000016047.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with 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)

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:

Joanne T Cotner

New Registered Office Address:

4829B Palm Beach Blvd

Enter Florida street address

Ft. Myers

, Florida

33905

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

Joanne T. Cotner
If Changing Registered Agent, Signature of New Registered Agent

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:

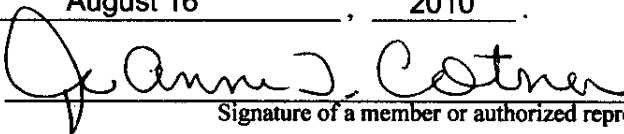
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Frederick Troy Cotner	3822 Highlight St Ft. Myers, FL 33905	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Joanne T Cotner	217 Madonna Drive Ft. Myers, FL 33905	<input checked="" type="checkbox"/> Add <i>JTC</i> <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED
10 AUG 30 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated August 16, 2010



Signature of a member or authorized representative of a member

Joanne T Cotner

Typed or printed name of signee

Notice Sale of Ownership

On this date August 16, 2010 I Frederick Troy Cotner sell Turnkey Auto Sales & Service LLC FEID#59-2107084 to Joanne T. Cotner for the sum of \$1.00. All and any assets or debits occurred or incurred on or before this date of sale with the exception of 2006 Dodge Ram Truck and Insurance coverage for the above mentioned truck will become the responsibility of Joanne T. Cotner.

I, Frederick Troy Cotner also hold the right to use the dealer's license at any time with the permission of Joanne T. Cotner. An agreement between Frederick Troy Cotner and Joanne T Cotner has been made that any assets that were transferred in this sell and sold for profit Frederick Troy Cotner gets 50% of the sale amount.

By signing today I Frederick Troy Cotner no longer own Turnkey Auto Sales & Service LLC and the sole owner is Joanne T. Cotner.

Seller of Turnkey Auto Sales & Service, LLC:

Frederick Troy Cotner Frederick Troy Cotner Date: 8/16/2010

Buyer and New Owner of Turnkey Auto Sales & Service, LLC:

Joanne T. Cotner Joanne T Cotner Date: 8/16/2010

Witness: J. Cotner Sign/Print Date: 8/16/2010

Witness: _____ Sign/Print Date: _____

FILED
10 AUG 30 PM 2:00
CLERK OF STATE
TALLAHASSEE, FLORIDA