

L030000023741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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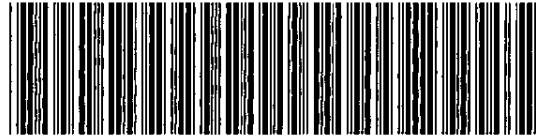
(Business Entity Name)

(Document Number)

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2008 FEB 15 P 3:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A. LUNT

FEB 18 2008

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MOTORS IN MOTION 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:

J. Kelly Bloomer  
(Name of Person)

BLOOMER GROUP LLC  
(Firm/Company)

631 N. U.S. HIGHWAY 1, Suite 303  
(Address)

NORTH Palm Beach, FL 33408  
(City/State and Zip Code)

For further information concerning this matter, please call:

J. Kelly Bloomer  
(Name of Person)

at (561) 845-7769  
(Area Code & Daytime Telephone Number)

2008 FEB 15 P 3:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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**

MOTORS IN MOTION LC

(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 6/30/2003 and assigned Florida document number L03000023741.

This amendment is submitted to amend the following:

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

MOTORS IN MOTION, LLC

(NOTE: "LLC" ONLY CHANGE)

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**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:

J. KELLY BLOOMER

New Registered Office Address:

631 N. U.S. HIGHWAY 1, SUITE 303

(Enter Florida street address)

NORTH PALM BEACH

(City)

Florida

33408

(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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

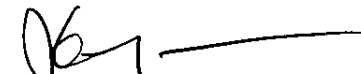
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	J. Kelly Bloomer	128 VICTORIA BLVD PALM BEACH GARDENS FLORIDA 33418	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	RANDALL J. HUNT	8671 HIGH CAY WEST PALM BEACH FLORIDA 33411	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	JOHN M. PROSSER	725 BRIGHTWATERS BLVD, NE ST. PETERSBURG, FL 33704	<input type="checkbox"/> Add <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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated 2/13/08

February 13, 2008 

Signature of a member or authorized representative of a member

J. Kelly Bloomer, MGRM

Typed or printed name of signee