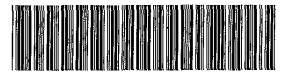
L04000024565

(Red	questor's Name)		
(Add	lress)		
(Add	Iress)		
(City	//State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Bus	iness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to F	Filing Officer:		
,			

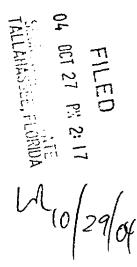
Office Use Only



900041163169

19/22/14--01027--020 **52.50

10/29/04--01003--011 **7.50



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: <u>AA TRA</u> il	ERMAY LLC	<u> </u>
DOCUMENT NUMB	ER: <u>LO 400002</u>	4565	
The enclosed Articles of	of Amendment and fee a	re submitted for filing.	
Please return all corresp	condence concerning thi	is matter to the following	
	SANFORD 1	of Contact Person)	
	(Name	of Contact Person)	
	AA TRAILE	ERMAX LLC m/Company)	
	(Fir	rm/ Company)	FE B T
<u></u>	6020 NW 7	7 Ph CouRT (Address)	PILED 2: 17 OF DOT 27 PH 2: 17 TALLAMASSEE, FLORIDA
		(Address)	
	Miami FL, 3	333≥/ ate/ and Zip Code)	2: 17
	(City/ St	ate/ and Zip Code)	7
For further information	concerning this matter,	please call:	
SANFORD PO 4 (Name of C	NSKY ontact Person)	at (<u>305</u>) <u>406 -</u> (Area Code & Daytim	9799 e Telephone Number)
•	•	,	
Enclosed is a check for	the following amount:		
□ \$35 Filing Fee □	l \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendm Division P.O. Box	Address nent Section of Corporations 6327 see, FL 32314	Street Address Amendment Section of Corporation of Corporation of Caines Str Tallahassee, FL 3	orations eet



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 27, 2004

SANFORD POLANSKY AA TRAILERMAX LLC 6020 NW 77TH COURT MIAMI, FL 33321

SUBJECT: AA TRAILERMAX LLC Ref. Number: L04000024565

We have received your document for AA TRAILERMAX LLC and check(s) controlling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$7.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a corporation, but your entity is an LLC. Please complete and return the enclosed form with the remaining \$7.50 due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 104A00056462

TRANSMITTAL LETTER

TO: Registration S Division of Co			
SUBJECT: A	A TRAILER MAX A (Name of Li	mited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
	SANFOLD	Po LANSKY Name of Person)	
	0	Name of Person)	
	AA THAILER	MAY LLC Firm/Company)	TAI S
	(Firm/Company)	P I
	6020 N	W 77 Th COURT (Address)	27 P
		FLORIDA 33321	O4 OCT 27 PH 2: 17 TALLANASSEE, FLORIDA
	(Cig.	State and Exp Code/	<i></i>
	concerning this matter, please		
SANE	(Name of Person)	at (305) 406 (Area Code & Daytime	e Telephone Number)
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	AATRAILERMAY LLC	
	AATRAILERMAY LLC (Present Name) (A Florida Limited Liability Company)	
	212.114	
FIRST:	The Articles of Organization were filed on 3/31/04 and assigned document number 10 40000 24565	
SECOND:	liability company:	4
	REMOVAL OF MANAGING MEMBELS /MANAGERS WILLIAM GRAY 6020 NW 77 TO COURT HIAMI, FLI33321	PILEU 007 27 PM 2: 17
0	WILLIAM GRAY 6020 NW 17 Th COURT	黑口
	6020 NW 17 COURT 821 HIAMI, FL, 33321	2: 17
3	JOSEPH DE MARIA	
	6020 NW 77 1 COURT	
	HIAMI FZ. 333E1	
Dated	october 25 , 2004.	
	Signature of a member of authorized representative of a member	_
	· · · · · · · · · · · · · · · · · · ·	
	SAWFORD POLANSKY Typed or printed name of signee	_
	Types of printed figure of Signee	

Filing Fee: \$25.00