

L04 0000 32243

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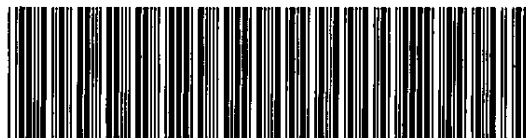
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: UNIVERSAL MOTORS OF CENTRAL FL, 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:

Maria Maldonado

(Name of Person)

Universal Motors of Central FL, LLC

(Firm/Company)

7575 Dr. Phillips Blvd., Suite 270

(Address)

Orlando, FL 32819

(City/State and Zip Code)

For further information concerning this matter, please call:

Maria Maldonado

(Name of Person)

at ( 407 ) 581-5690

(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

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06 MAY 31 PM 1:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**UNIVERSAL MOTORS OF CENTRAL FLORIDA, LLC**

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on April 28, 2004 and assigned document number L04000032243.

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

**Add:** Robert J. McDonald as Managing Member

Amend Addresses as follows:

Principal Address: 4771 Sand Lake Rd, Suite B,  
Orlando, FL 32819

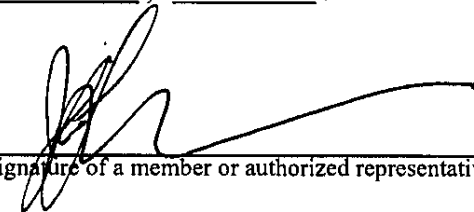
Mailing Address: 7575 Dr. Phillips Blvd., Suite 270  
Orlando, FL 32819

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 MAY 31 PM 1:11

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Dated May 26, 2006

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

**J. Craig Lynch, Member**

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**