## L04000035598

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Consideration to Elling Officers        |
| Special Instructions to Filing Officer: |
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> 10 JAN -6 PHIO: 54 SECRETARY OF STATE ALLAHASSEE, FLORID,

S. HAWKES

JAN 8 2010

EXAMINER

## **COVER LETTER**

DUHANEY MOTORS, 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:

Trevor Duhaney

Name of Person

Firm/Company

8301 NW 7th Avenue

Address

Miami, FL 33150

City/State and Zip Code

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

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

Name of Person

\$25.00 Filing Fee

TO: 1

Registration Section

\$30.00 Filing Fee & Certificate of Status

Certified Copy
(additional copy is enclosed)

at (786)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

**MAILING ADDRESS:** 

Marlon A. Hill, Esq.

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

STREET/COURIER ADDRESS:

777-0184

Area Code & Daytime Telephone Number

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| DUHA1   | NEY MOTORS, LLC   |                         |                          |
|---|---|-------------------------|--------------------------|
| ( <u>Name of the Limited Liabili</u><br>(A Florida  | ity Company as it now appea<br>a Limited Liability Company) | irs on our records.)    |                          |
| (********   | ,,, ,, , ,, , ,   |                         |                          |
| The Articles of Organization for this Limited Liability   | Company were filed on                                       | 05/03/2004              | and assigned             |
| Florida document number 10400035598   | Nontrina State of T   |                         |                          |
|   |   |                         |                          |
| This amendment is submitted to amend the following:   |   |                         | 55. <b>6</b>             |
| A. If amending name, enter the new name of the li   | mited liability company he                                  | re:                     | 題量型                      |
|   |   |                         | 3 6                      |
| The new name must be distinguishable and end with the w"L.L.C."                                 | ords "Limited Liability Comp                                | any," the designation " | LLC" of the abbreviation |
|   |   |                         | F.S. S.                  |
| Enter new principal offices address, if applicable:   |   | , ,,                    | 0.5                      |
| <u>(Principal office address MUST BE A STREET ADL</u>   | <u>ORESS)</u>   |                         | <del>(2)</del>           |
|   |   | 7711                    |                          |
|   |   |                         |                          |
| Enter new mailing address, if applicable:   |   |                         | Marian II.               |
| (Mailing address MAY BE A POST OFFICE BOX)  | *** ** ** ** *************************                      |                         |                          |
|   |   | ···                     |                          |
|   |   |                         |                          |
| B. If amending the registered agent and/or registered agent and/or the new registered office ad |   | our records, enter      | the name of the new      |
| registered agent and/or the new registered office ad  | aress here.   |                         |                          |
| Name of New Registered Agent:   |   |                         |                          |
|   |   |                         |                          |
| New Registered Office Address:  | F:  | nter Florida street add | trace                    |
|   | 127   | ner 1 toriuu sireel uud | u (53)                   |
|   | C**-  | , Florida               | Zip Code                 |
|   | City  |                         | гір Соае                 |

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 <u>Address</u> Type of Action Maria C. Pino 15969 NW 64th Avenue Miami Lakes< FL 33014 ☐ Add √ Remove Remove 韶 ∏Ãdd Remove MAdd Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated | 

Page 2 of 2

Filing Fee: \$25.00