

**L05000052172**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

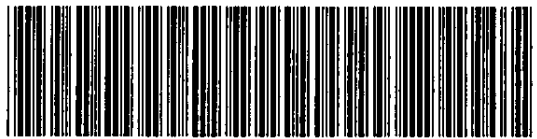
Special Instructions to Filing Officer:

**L. SELLERS**

MAY 10 2010

**EXAMINER**

Office Use Only



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05/06/10--01035--020 \*\*25.00

**FILED**

10 MAY -7 PM 12:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Broward Auto Mall, 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:

**Sandra Daley**

Name of Person

**Broward Auto Mall, LLC**

Firm/Company

**2293 SW Martin Highway, Suite 252**

Address

**Palm City, FL 34990**

City/State and Zip Code

**support@thebrowardautomall.com**

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

For further information concerning this matter, please call:

**Sandra Daley**

Name of Person

at ( **772** )

**781-6700**

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

**Broward Auto Mall, LLC**

Page 1 of 2

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

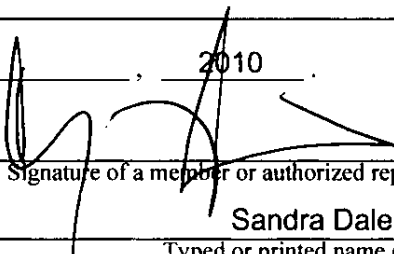
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Please add the following as members of the LLC:

Michael Samara, 210 3rd Street West, apt. 4205, Bradenton, FL 34205

Dated May 5th, 2010

  
Signature of a member or authorized representative of a member

Sandra Daley

Typed or printed name of signee