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(Red	questor's Name)	
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EXAMINER

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2010 MAY 19 PM 2: 39 SECKETARY OF STATE TALL AHASSEE, FLORIDA

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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Broward	Auto Mall LLC	
		ted Liability Company	
	f Amendment and fee(s) are sul	_	
		Sandra Dalay	
		Sandra Daley Name of Person	
		Name of Ferson	
	В	roward Auto Mall LLC	
		Firm/Company	
	220	93 SW Martin Hwy #252	7
		Address	
			2010 MAY 1 SEGRETAI TALLAHAS
		Palm City, FL 34990	ASS
		City/State and Zip Code	Y 19 PM TARY OF TASSEE.F
	E-mail address: (to be used for future annual report notificati	<u> </u>
		-	ATE DRID.
For further information	concerning this matter, please of	rall:	1
S	andra Daley	at (772) 78	1 6700
Name	of Person	Area Code & Daytime Te	lephone 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)
MAII	LING ADDDESS.	STDEET/COUDIED	A DDDESS.

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brov	vard Auto Mall LLC		
(<u>Name of the Limited Liabi</u> (A Florid	<mark>lity Company as it now appear</mark> da Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability	y Company were filed on	5/24/05	and assigned
Florida document numberL05000052172	·		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company her	<u>e</u> :	
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Compa	ny," the designation '	man and
Enter new principal offices address, if applicable:			2010 MJ SECRE
(Principal office address MUST BE A STREET AD	DRESS)		ASS
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			PH 2: 39 PH 2: 39 PH 2: 39
B. If amending the registered agent and/or regregistered agent and/or the new registered office and Name of New Registered Agent:		our records, <u>enter</u>	the name of the new
New Registered Office Address:	En	ter Florida street aa	dress
		, Florida _	
	City		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 of Managing Member being added or removed from our records:

MGR = Manager

	= Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add
		LAHASS	Adet T
			
D 14		A	Remove —
D. If an		e(s) here: (Attach additional sheets, if necessary.)	
		mber of the LLC effective May 20th 2010:	
	Jay Lambert of 2302 Pelinion Street,	Apopka, Florida 32712	_
	2. Please REMOVE the following men	mber from the LLC effective July 5th 2010	
	Ruslan Mezokh of 265 SW Port St. L	ucie Blvd, Port St. Lucie, FL 34984	_
Dated	5/17/20(0), Signature of a member	or authorized representative of a member	
		an DRA DALEY, or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00