

L05000058307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

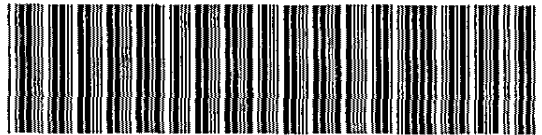
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

[Handwritten Signature]

Office Use Only



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10/09/06--01012--011 **25.00

FILED
06 OCT -9 PM 3:15
RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
10 OCT -9 PM 12:12
CLERK OF FILINGS

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

FILED
06 OCT -9 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- LEO BROS LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
LEO BROS LLC, a Florida Limited Liability Company**

FILED
06 OCT -9 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST:

ARTICLES OF ORGANIZATION for *LEO BROS LLC, a Florida Limited Liability Company* were filed on the 13th day of June, 2005, and assigned Document Number: L05000058307.

SECOND:

The following amendments to the *ARTICLES OF ORGANIZATION* were adopted by the Limited Liability Company:

AMENDMENT NUMBER ONE

ARTICLE IV of the *ARTICLES OF ORGANIZATION* of *LEO BROS LLC, a Florida Limited Liability Company* is hereby amended as follows:

- a. The name and Florida street address of the registered agent is

**LARRY L. ADAIR
Attorney At Law
450 East Las Olas Boulevard
Suite Number 800
Fort Lauderdale, Florida 33301-2223**

AMENDMENT NUMBER TWO:

ARTICLE V of the *ARTICLES OF ORGANIZATION* of *LEO BROS LLC, a Florida Limited Liability Company* is hereby amended as follows:

- a. **ARSEL MOTORLU ARACLAR DIS TICARET LTD., STI**, whose address is:

Barbaros Bulvari
Suite Number 131/B
Besiktas, Istanbul
TURKEY 80700

be and the same is hereby removed as a Member of the Company.

- b. **ARSEL MOTORLU ARACLAR DIS TICARET LTD., STI**, whose address is:

Barbaros Bulvari
Suite Number 131/B
Besiktas, Istanbul
TURKEY 80700

be and the same is hereby also removed as a Manager of the Company.

- c. **JAHIT H. KAVURT**, whose address is:

2455 East Sunrise Boulevard
Fort Lauderdale, Florida 33304
U. S. A.

be and the same is hereby also removed as a Member of the Company.

- d. **MUSTAFA ARSLAN**, whose address is:

21175 LaVista Circle
Boca Raton, Florida 33428
U. S. A.

be and the same is hereby appointed as the sole Member of the Company.

- d. **LARRY L. ADAIR**, whose address is:

450 East Las Olas Boulevard
Suite Number 800
Fort Lauderdale, Florida 33301-2223
U. S. A.

be and the same is hereby appointed as Manager of the Company.

DATED: SEPTEMBER 26, 2006

**LEO BROS LLC, a Florida Limited
Liability Company**

By: _____


**JAHIT H. KAVURT, as an
authorized Member of the Company**

**CONSENT TO APPOINTMENT AS MEMBER
OF LEO BROS LLC**

I hereby accept the appointment as Member of LEO BROS LLC., a Florida Limited Liability Company as of the day and date first written above.

By: 

MUSTAFA ARSLAN

09.22.06

**CONSENT TO APPOINTMENT AS MANAGER
OF LEO BROS LLC**

I hereby accept the appointment as Manager of LEO BROS LLC, a Florida Limited Liability Company as of the day and date first written above.

By: 

LARRY L. ADAIR, Manager

09/22/16

**CONSENT TO REMOVAL AS MANAGING MEMBER
AND
MEMBER OF LEO BROS LLC**

We hereby consent to removal as Manager of LEO BROS LLC., a Florida Limited Liability Company as of the day and date first written above.

We further consent to remove as a Member of LEO BROS LLC, a Florida limited Liability Company also of the day and date first written above.

DATED: September 22, 2006

ARSEL MOTORLU ARACLAR DIS
TICARET LTD. STI

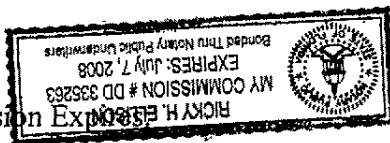
By: _____

MUSTAFA ARSLAN, President

STATE OF FLORIDA

COUNTY OF BROWARD

I HEREBY CERTIFY that on this the 26th day of September, 2006, as an officer duly authorized in this State and County to take acknowledgments, personally appeared JAHIT H. KAVURT, as a Member of *LEO BROS LLC, a Florida Limited Liability Company*, who on behalf of the company with authority to execute same. He is personally known to me or produced as identification _____, and who executed the foregoing instrument and he acknowledged before me that he executed same.

My Commission Expires _____



NOTARY PUBLIC
Printed Name: _____

STATE OF FLORIDA

COUNTY OF BROWARD

I HEREBY CERTIFY that on this the 12 day of September, 2006, as an officer duly authorized in this State and County to take acknowledgments, personally appeared MUSTAFA ARSLAN, in his capacity as newly appointed Member of *LEO BROS LLC, a Florida Limited Liability Company*, who on behalf of the company with authority to execute same. He is personally known to me or produced as identification _____, and who executed the foregoing instrument and he acknowledged before me that he executed same.

NOTARY PUBLIC

Printed Name: Larry L. Adair

My Commission Expires: 12/23/06



Larry L. Adair
My Commission DD173847
Expires December 23, 2006

STATE OF FLORIDA

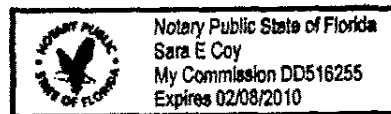
COUNTY OF BROWARD

I HEREBY CERTIFY that on this the 2nd day of September, 2006, as an officer duly authorized in this State and County to take acknowledgments, personally appeared **LARRY L. ADAIR**, in his capacity as newly appointed Manager of **LEO BROS LLC, a Florida Limited Liability Company**, who on behalf of the company with authority to execute same. He is personally known to me or produced as identification _____, and who executed the foregoing instrument and he acknowledged before me that he executed same.


NOTARY PUBLIC

Printed Name: Sara E. Coy

My Commission Expires: February 8, 2010



STATE OF FLORIDA

COUNTY OF BROWARD

I HEREBY CERTIFY that on this the 22 day of September, 2006, as an officer duly authorized in this State and County to take acknowledgments, personally appeared MUSTAFA ARSLAN, as a President of *ARSEL MOTORLU ARACLAR DIS TICARET LTD., STI, a Corporation of the Turkish Republic*, who on behalf of the company with authority to execute same. He is personally known to me or produced as identification _____, and who executed the foregoing instrument and he acknowledged before me that he executed same.


NOTARY PUBLIC

Printed Name: Larry L. Adair

My Commission Expires: 12/22/06



Larry L. Adair
My Commission DD173847
Expires December 23, 2006

**CERTIFICATE
DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED**

In pursuance of Chapter 48.091, Florida Statutes, the
following is submitted, in compliance with said Act:

That LEO BROS LLC., a Florida limited liability company, heretofore organized under the laws of the State of Florida, with its principal office, as indicated in the *ARTICLES OF ORGANIZATION*, in the City of Fort Lauderdale, Broward County, Florida, has named Larry L. Adair, Attorney At Law, located at 450 East Las Olas Boulevard, Suite Number 800, Fort Lauderdale, Florida 33301-2223, as its agent to accept service of process within this State.

ACKNOWLEDGMENT

Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in this Certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

By 

LARRY L. ADAIR, Registered Agent