## L05000060395

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11 HAY -2 PH 2: 28

T. HAMPTON

MAY - 4 2011

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: B&L Champion 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:		
Gregory Loucks Name of Person		
Firm/Company		
3545 Oglobay Dr		
Green Cove Springs FL 32043  City/State and Zip Code  COTSQUE DOLL 2 (Q) / Qhoo com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:  11 D		
Name of Person  Name of Person  Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$ \$60.00 Filing Fee, \\ \text{Certified Copy} \\ \text{(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

## ARTICLES OF AMENDMENT TO

## ARTICLES OF ORGANIZATION

SECRETARY OF STATE DIVISION OF CORPORATIONS

	11 MAY -2 PM 2: 28
B&L Champion	Motors LLC
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compar Florida document number <u>LD 5000060395</u> .	2/12/200
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
The man and the distinction by the second and second at the second at th	mited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."	mited Liability Company," the designation "LLC" or the appreviation
Enter new principal offices address, if applicable:	299 Thornbrook Court
(Principal office address MUST BE A STREET ADDRESS)	
	<del></del>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	office address on our records, enter the name of the new
·	
Name of New Registered Agent:	
New Registered Office Address:	Foton Florida de adalas
	Enter Florida street address
-	, Florida

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 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** <u>Address</u> **Type of Action** Name 1 MGRM Gregory E. Loucks MGRM M. Dean Ballard Add Add Remove ☐ Add ☐ Remove Add Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a mer Typed or printed name of signe

Page 2 of 2

Filing Fee: \$25.00