

# L06000006451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

 WAIT

MAIL

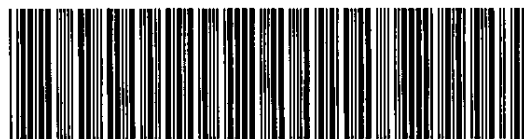
(Business Entity Name)

(Document Number)

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

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07/18/13--01007--007 \*\*25.00

**FILED**

13 JUL 26 PM 1:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER

JUL 26 2013



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 19, 2013

CARMART LLC  
DAVID RACITI  
P.O. BOX 82902  
TAMPA, FL 33682

SUBJECT: CARMART LLC  
Ref. Number: L06000006451

We have received your document for CARMART LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 513A00017578

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: carmart llc

Name of Limited Liability Company

The enclosed Articles of Amendment and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

david raciti

Name of Person

carmart llc

Firm/Company

12738 n florida ave

Address

tampa fl 33612

City/State and Zip Code

carmartfl@yahoo.com

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

For further information concerning this matter, please call:

david

Name of Person

at 813 532 6031

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

ATTN Karen  
Sally

850 245-6030

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FILED  
13 JUL 26 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CARMART LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/19/2006 and assigned  
Florida document number L06000006451.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable: \_\_\_\_\_

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, 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 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>                      |
|--------------|--------------------|-------------------------|--|
| MGR          | MARIANA DANISHMENT | 371 CHANNELSIDE WALKWAY | <input type="checkbox"/> Add               |
|              |                    | STE 902 TAMPA FL 33602  | <input checked="" type="checkbox"/> Remove |
|              |                    |                         | <input type="checkbox"/> Add               |
|              |                    |                         | <input type="checkbox"/> Remove            |
|              |                    |                         | <input type="checkbox"/> Add               |
|              |                    |                         | <input type="checkbox"/> Remove            |
|              |                    |                         | <input type="checkbox"/> Add               |
|              |                    |                         | <input type="checkbox"/> Remove            |
|              |                    |                         | <input type="checkbox"/> Add               |
|              |                    |                         | <input type="checkbox"/> Remove            |
|              |                    |                         | <input type="checkbox"/> Add               |
|              |                    |                         | <input type="checkbox"/> Remove            |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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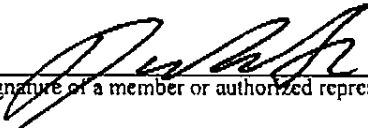
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Dated july 26th 2013

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
david raciti

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00