

LO6 000038631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

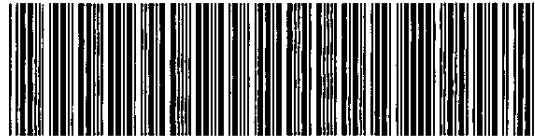
(Business Entity Name)

(Document Number)

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

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T. CLINE

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EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 29, 2009

VALERIE MANGINE  
903 E. 104TH ST., SUITE 610  
KANSAS CITY, MO 64131

SUBJECT: PHRII, LLC  
Ref. Number: L06000038631

We have received your document for PHRII, 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):

The enclosed annual report/uniform business report or reinstatement must be filed and the appropriate fee submitted before your document can be filed.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is P03593.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 909A00031603

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PHRII, 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:

**Valerie B. Mangine**  
Name of Person  
**Douthit Frets Rouse Gentile & Rhodes, LLC**  
Firm/Company  
**903 E. 104th St., Suite 610**  
Address  
**Kansas City, MO 64131**  
City/State and Zip Code  
**vmangine@dfrglaw.com**  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

**Valerie B. Mangine** at ( **816** ) **941-7600**  
Name of Person 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

**DOUTHIT FRETS ROUSE GENTILE & RHODES, LLC**  
**ATTORNEYS AT LAW**

EVAN A. DOUTHIT\*  
TIMOTHY S. FRETS  
PHILLIP C. ROUSE  
R. DOUGLAS GENTILE\*  
RANDALL L. RHODES\*  
JAMES M. SEAMAN\*  
MICK LERNER\*  
PAULA L. BROWN\*  
MARY C. O'CONNELL  
CHRISTOPHER J. STUCKY\*  
BENJAMIN C. FIELDS\*  
VALERIE B. MANGINE  
LESLIE A. KULICK\*  
JOHN W. WITTEN\*  
ROBERT S. HERMAN  
ASHLEY E. ROBINSON\*

903 EAST 104<sup>TH</sup> STREET  
SUITE 610  
KANSAS CITY, MISSOURI 64131-3464  
(816) 941-7600  
(816) 941-6666 (FACSIMILE)

Kansas Address  
7015 College Blvd, Ste 325  
Overland Park, Kansas 66211

[www.dfrglaw.com](http://www.dfrglaw.com)

OF COUNSEL  
NORMAN E. GAAR\*  
ELISH A. MEYERS

LEGAL ASSISTANTS  
DENISE E. CHAFFEE, R.N.  
JEANIE L. MASON  
SAUNNY K. WILEY  
LORIE N. DEPERALTA  
KRISTEN L. KELLY  
CAROL S. STURDIVAN  
\* Admitted in Missouri and Georgia  
\* Admitted in Missouri and Kansas  
All Others Admitted in Missouri

October 26, 2009

Tammi Cline  
Regulatory Specialist II  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Letter Number 909A00031603

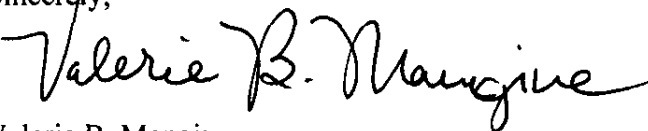
Dear Ms. Cline:

Enclosed are the following documents to be filed in connection with the reinstatement of PHRII, LLC and its name change to Yes Automotive Finance, LLC:

- (i) a copy of your letter dated September 29, 2009 regarding the return of previously sent documents;
- (ii) an executed Limited Liability Company Reinstatement form;
- (iii) a check in the amount of \$516.25 for the reinstatement fee (\$100, plus \$416.25 for three years' annual report fees); and
- (iv) revised and executed Articles of Amendment to the Articles of Organization of PHRII, LLC reflecting the name change to Yes Automotive Finance, LLC (no check is included for the filing fee because that was submitted earlier and not returned with your letter dated September 29, 2009).

Please file the reinstatement papers and then the amendment. If you have any questions regarding this request or need any additional information, please do not hesitate to contact me directly. Thank you for your assistance with these matters.

Sincerely,

  
Valerie B. Mangine

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

PHRIL, 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 April 11, 2006 and assigned Florida document number L06000038631.

This amendment is submitted to amend the following:

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

Yes Automotive Finance, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	

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

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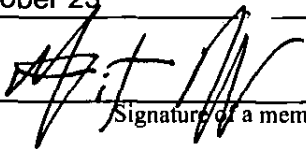
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated October 23 2009



Signature of a member or authorized representative of a member

Amit Raizada, Authorized Member of Spectrum Management, LLC

Typed or printed name of signee