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SECRETARY OF STATE
ALL AHASSEE FLORING

J. BRYAN

MAR 1.7 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	;					
SUBJECT: En rique	(Name of Lim	Repair ited Liability Company)	LLC			
The enclosed Articles of Amendme	ent and fee(s) are sub	omitted for filing.				
Please return all correspondence co	oncerning this matter	to the following:				
	Enrique	(Name of Person)				
	<u> </u>	(Firm/Company)			OS HAR	T
_2.7	779 0	1d Dixiy (Address)	Huy		16 P	1
_/<	issimm	er Fl (City/State and Zip Code)	347	44	MAR 16 PM 3: 39 CRETARY OF STATE CRETARY OF STATE	Ċ
For further information concerning	this matter, please ca	all:			•	
S. Robort (Name of Person)	A	at (107) 3 (Area Code	YE 775 & Daytime Telepl	hone Number)	_	
Enclosed is a check for the following	ng amount:					
	00 Filing Fee & rtificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is		\$60.00 Filing F. Certificate of Certified Cop (additional co	Status &	

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 OF



(Name of the Limited Li	Auto Repair, iability Company as it now appear lorida Limited Liability Company)	LLC s on our records.)	· · ·
The Articles of Organization for this Limited Liab	oility Company were filed on	8/21/08	_ and assigned
Florida document number <u>LO GOCOO & ACC</u> This amendment is submitted to amend the follow			
A. If amending name, <u>enter the new name of th</u>	-	<u>e</u> :	
For 1946 A The new name must be distinguishable and end with t 'L.L.C."	Auto Repair 4 the words "Limited Liability Compai	Defailing ny," the designation "ELC	LLC C"or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered offic		ur records, <u>enter the</u>	name of the new
Name of New Registered Agent:			
New Registered Office Address:	(En	ter Florida street addre	ss)
	(0)	, Florida	(T) C 1)
	(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 = M MGRM =	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
	· .		Add Remove
			Add Remove
D. If amen	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessa	O9 MAR SECRETA
_			LED 16 PH 3: 39 RY OF STATE SEE, FLORIDA
Dated	$I \cdot O \setminus I$	er or authorized representative of a member	
	Enrique Vela	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00