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T. CLINE

AUG 1 2 2008

EXAMINER

COVER LETTER

TO: Registratión Sec Division of Corp		,	
SUBJECT: Krau Au	ito, LLC	·	
	(Name of Lim	ited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Joseph A. Porrello		
		(Name of Person)	
	Joseph A. Porrello, P.A.		
		(Firm/Company)	
	P.O. Box 450249		
		(Address)	
	Miami, Florida 33245		
		(City/State and Zip Code)	ES 23
For further information co	oncerning this matter, please c	all:	2000 AUG 1
		205 274 0002	
Joseph A. Porrello (Name o	f Person)	at (305) 374-0092 (Area Code & Daytime T	elephone Number) - S
,	,	` ·	elephone Number) 1 STATE 02
Enclosed is a check for th	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ipany as it now appears on our reco ed Liability Company)	rds.)	
any were filed on February 27, 200	07 and assigned	
liability company here:		
Limited Liability Company," the desig	gnation "LLC" or the abbreviation	
<u> </u>	PG G	
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	705 =	
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	7	
d office address on our records here:	, enter the name of the nev	
(Enter Florida	street address)	
, FI	, Florida	
(City)	(Zip Code)	
	Limited Liability Company," the designment of th	

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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	».)
_			
Dated		per or authorized representative of a member	
	Ary Krau, Managing M	lember	
	Type	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00