

L07000060263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

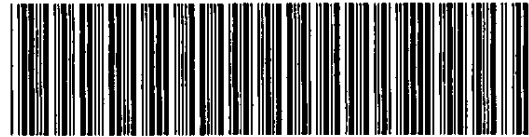
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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K. SALLY
EXAMINER
JUL 5 - 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL BRANDS AUTOPARTS TRADING, 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:

ALVARO FERNAUD

Name of Person

ONE WORLD INTERNATIONAL, LLC

Firm/Company

4474 WESTON RD SUITE 180

Address

DAVIE, FL 33331

City/State and Zip Code

afernaud@gmail.com

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

For further information concerning this matter, please call:

Alvaro Fernaud

Name of Person

at (954)

588-6660

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

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TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Page 1 of 2

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>
MGRM	JAMES JAROSCAK	841 LAVENDER CIRCLE WESTON, FL 33327	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	ALVARO FERNAUD	4324 LAUREL RIDGE CR WESTO, FL 33331	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	ANDREA PINTO	4474 WESTON RD # 180 DAVIE, FL 33331	<input type="checkbox"/> Add <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

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

Dated JUNE, 28, 2012

Signature of a member or authorized representative of a member

ALVARO FERNAUD

Typed or printed name of signee