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| (Requestor's Name)                      |  |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |  |
|   |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
|   |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
|   |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
|   |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
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Office Use Only



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TILED 2011 JUL 18 PH 12: 4; SEGRETARY OF STATE

J. SAULSBERRY EXAMINER

JUL 19 2011

## **COVER LETTER**

· TO:

| TO: Registration Se<br>Division of Cor |  |   |  |  |  |
|--|--|---|--|--|--|
| SUBJECT:                               | Automoti   | ive Empire, LLC   |  |  |  |
| GODDECT.                               |  | ited Liability Company  |  |  |  |
| The enclosed Articles of               | Amendment and fee(s) are sul   | bmitted for filing.   |  |  |  |
| Please return all correspo             | ndence concerning this matter  | to the following:   |  |  |  |
|  |  | Felix Delgado Name of Person  |  |  |  |
|  | Au   | utomotive Empire, LLC   |  |  |  |
|  |  | Firm/Company  |  |  |  |
|  | 2813 Ex  | cecutive Park Drive, Ste. 119   | 7 <sub>0</sub> 2   |  |  |
|  |  | Address   | II J   |  |  |
|  |  | Weston, FL 33331  | HAS HAS  |  |  |
|  |  | City/State and Zip Code   | 8 RYC  |  |  |
|  | Bamail address: (  | tolabusafd@gmail.com to be used for future annual report notification | DF S   |  |  |
| For further information co             | oncerning this matter, please  | •   | 2011 JUL 18 PM 12: 42 SEGRETARY OF STATE TALLAHASSEE, FLORIDA                            |  |  |
| Mr. I                                  | =elix Delgado  | at (_954_) 727  | -9823 office   |  |  |
| Name of                                |  | Area Code & Daytime Tele  | phone Number   |  |  |
| Enclosed is a check for the            | e following amount:  |   |  |  |  |
| \$25.00 Filing Fee                     | \$30.00 Filing Fee & Certificate of Status   | S55.00 Filing Fee & Certified Copy (additional copy is enclosed)      | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |  |
|  |  |   |  |  |  |
|  | NG ADDRESS: ation Section  | STREET/COURIER ADDRESS: Registration Section                          |  |  |  |
| Divisio                                | Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building                                |   |  |  |  |
| ,                                      | Tallahassee, FL 32314 Conton Building  Tallahassee, FL 32314 2661 Executive Center Circle  Tallahassee, FL 32301 |   |  |  |  |

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

| J.   | TO                                  | RGANIZATION                                  | 7                   | FILED PHIZ: 42 SECRETARSEE, ETATO |  |  |
|--|-------------------------------------|--|---------------------|-----------------------------------|--|--|
| Au   | itomotive E                         | mpire, LLC                                   |                     | 严星口                               |  |  |
| (Name of the Limited L<br>(A F   | iability Compar<br>Iorida Limited L | y as It now appears on o<br>ability Company) | ur records.)        | 2: 12<br>2: 12                    |  |  |
| The Articles of Organization for this Limited Lial   | oility Company                      | were filed on06                              | /13/2007            | and assigned                      |  |  |
| Florida document numberL07000624   | 01                                  |  |                     |                                   |  |  |
| This amendment is submitted to amend the follow  A. If amending name, enter the new name of the new name must be distinguishable and end with "L.L.C." | he limited liabi                    |  | ne designation "    | 'LLC" or the abbreviation         |  |  |
| Enter new principal offices address, if applical   | ole:                                | 2813 Executive Pa                            | ark Drive, S        | te. 119                           |  |  |
| (Principal office address MUST BE A STREET   | Weston, FL 33331                    |  |                     |                                   |  |  |
|  |                                     |  |                     |                                   |  |  |
| Enter new mailing address, if applicable:  | 2813 Executive Park Drive, Ste. 119 |  |                     |                                   |  |  |
| (Mailing address MAY BE A POST OFFICE BOX)   |                                     | Weston, FL 33331                             |                     |                                   |  |  |
| B. If amending the registered agent and/or registered agent and/or the new registered officers.  | ce address here                     | :  | cords, <u>enter</u> | the name of the new               |  |  |
| Name of New Registered Agent:  | Felix Delgad                        | 0  |                     |                                   |  |  |
| New Registered Office Address:   | 2813 Executive Park Drive, Ste. 119 |  |                     |                                   |  |  |
|  |                                     | Enter Florida street address                 |                     |                                   |  |  |
|  |                                     | Weston                                       | , Florida           | 33331                             |  |  |
|  |                                     | 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 **Type of Action Address** Title Name Add **MGMR** Felix Delgado 2813 Executive Park Drive, Ste. 119 Remove Weston, FL 33331... Myrna A. Delgado 2813 Executive Park Drive, Ste. 119 MGMR Remove Weston, FL 33331 **MGMR** D & G Florida Empire, LLC 320 NE 44 Street Remove Ft Lauderdale FL 33334 Danny Olivo ☐ Add MGR 320 NE 44 Street Remove Et Lauderdale, FL 33334 MGR Gerardo Rodriguez  $\square$ Add 320 NE 44 Street Remove Ft. Lauderdale, FL 33334 ☐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Felix Delgado Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00