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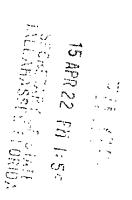
(Re	equestor's Name)	
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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	CT: Regenc	y Vehicle Repair LLC		
		Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please 1	eturn all correspon	ndence concerning this matter	to the following:	
		James G. Knollmiller		
			Name of Person	
		Knollmiller & Arenof		
			Firm/Company	
		1745 S. Alma School		
			Address	
		Mesa, Arizona 85210	0: 25: 4	
		jknollmiller@aboute	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti	fication)
For furt	her information co	oncerning this matter, please ca	all:	
Jan	nes G. Knollmiller Name of	·····	at (480) 345-0444 Area Code Daytim	e Telephone Number
	Name of	reison	Area Code Dayum	e reiephone Numoer
Enclose	d 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

Regency Vehicle Repai	r LLC	
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Li	ability Company were filed on November 16, 200°	7 and assigned
•	ability Company were fried on November 10, 200	and assigned
Florida document number <u>L07000115854</u>	 •	
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
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 applications	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
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 of		Fig
		5 5
Name of New Registered Agent:	David M. Johnson	
		名 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
New Registered Office Address:	620 West New York Avenue Enter Florida street address	
	Lines 1 sortal street address	64 -
	Deland , Flori	da 32720 1
No. Declar 14 at 01 at 15 at 15	•	Zip Code
New Registered Agent's Signature, if changing R	Registered Agent:	
	d agent and agree to act in this capacity. I furth er and complete performance qf my duties, and	
	stered agent as provided for in Chapter 605, F.S.	
being filed to merely reflect a change in the r company has been notified in writing of this c	registered office address. I hereby confirm that is change.	the limited liability
	If Changing Rogistered Agent, Signature of N	vew Registered Agent
	Page 1 of 3	

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Richard Nicolds	103 N. Volusia	\□ Add
		Orange City, Florida 32763	Remove
MGR	David M. Johnson	620 West New York Avenue	Add
		Deland, Florida 32720	□ Remove
			☐ Remove
			Remove 22
			Add
			Remove
		<u> </u>	□ Add
			☐ Remove

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. •		
tive date, if oth fective date must be ate this document is	ner than the date of filing: April 2015 e specific, cannot be prior to date of receipt or filed date and cannot filed by the Florida Department of State)	oe more than 90 days after
late this document is	ter than the date of filing: April 2015 e specific, cannot be prior to date of receipt or filed date and cannot filed by the Florida Department of State) , 2015	(optional pe more than 90 days after
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Page 3 of 3

Filing Fee: \$25.00

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