## L0800000118

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## **COVER LETTER**

Registration Section

TO:

Division of Corporations		
SUBJECT: PRECISION AUTO SERVICES	SHC	
	mited Liability Company)	
The enclosed Articles of Amendment and fee(s) are su	abmitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
MILDOINE ALIQUO	TIA:	
MILDRINE AUGUSTIN (Name of Person)		
PRECISION AUTO	SERVICES, LLC	
	(Firm/Company)	
719 NW 1ST STREET		
	(Address)	
FORT LAUDERDA	LE, FL 33311 (City/State and Zip Code)	
For further information concerning this matter, please	call:	
MILDRINE AUGUSTIN	at (954 ) 677-1981	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
<u> </u>		
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  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	

FILED

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE
TALLAHASSEE FLORIDA

(Zip Code)

08 JAN 24 AH 11: 06

PRECISION AUTO SERVICES, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JANUARY 3, 2008 and assigned Florida document number <u>L0800000718</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PRECISION AUTO SALES & SERVICES, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) Florida

## 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.

(City)

(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 <u>Title</u> Type of Action Name **Address** Add Remove Add Remove ∏Add Remove Add Remove  $\Box$ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JANUARY 10 , 2008 .

\*\*Bildrice Augustian\*\*
Signature of a member or authorized representative of a member

MILDRINE AUGUSTIN

Typed or printed name of signee

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Filing Fee: \$25.00