L08000007613

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J. SAULSBERRY EXAMINER

JUL 5 2012

COVER LETTER

SUBJECT:	SMART CH	OICE MOTOR, LLC		- 3	
		ited Liability Company		2012 JUL - 2 AN OF STAT	P OCH
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.		ASSA -2	T.
Please return all corresp	ondence concerning this matter	to the following:	•	FE, FLO	\$ \$
		JULIO A TORO		RIE	30
		Name of Person		7	
		Firm/Company	<u>.</u>		
		Address			
ORLANDO FL 32817					
		City/State and Zip Code		JĀI 3S	
	E-mail address: (to be used for future annual report notificat	ion)	CRE	
For further information	concerning this matter, please of	call:		TARY	45.000
	LIO A TORO	at (5-6769		
Name (of Person	Area Code & Daytime T	elephone Number	STATE	لسيا
Enclosed is a check for t	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

TO:

Registration Section Division of Corporations

> 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



SMART CHOICE MOTOR, 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 Liab Florida document number L080000076	• •	01/22/2008	and assig	ned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	ne limited liability company he	ere:		
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Comp	pany," the designation "l	LLC" or the abb	previation
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET)	4DDRESS)		SE	
			AR -	
			TATI:	P. Comment
Enter new mailing address, if applicable:			<u>.</u> ₩₹ -	<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u></u>		FS	
			ORIO	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter	₽	the new
Name of New Registered Agent:				
New Registered Office Address:	F	nter Florida street add	Iress	
	L			
	City	, Florida	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	ANTONIO HERMIDA	9627 WESTOVER CLUB CIR WINDERMERE FL 34786	✓ Add Remove
			Add Remove
			Add Remove
	<u></u>		Add Remove
			Add Remove
			AddRemove
D. If amend	ding any other information, ent	er change(s) here: (Attach additional sheets, if nece	SECRETARY
	•		OF STATE T
Dated	JUNE 25	, <u>2012</u> .	ZOIZ JUL -2 SECRETARY D
	Signature of	a member or authorized representative of a member JULIO A TORO Typed or printed name of signee	FSTAT F
		Page 2 of 2	30 DA

Filing Fee: \$25.00