

LD8000017353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

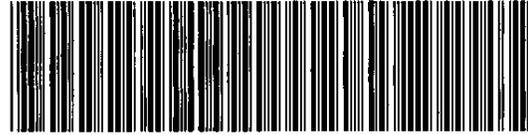
Special Instructions to Filing Officer:

L. SELLERS

OCT 28 2010

EXAMINER

Office Use Only



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10/25/10--01007--021 **30.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 OCT 25 PM 1:47

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DI COMMERCIAL CAR WASH, 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:

TUAN NGUYEN
Name of Person
DI COMMERCIAL CAR WASH, LLC
Firm/Company
4847 N POWER DRIVE
Address
ORLANDO, FL 32818
City/State and Zip Code
DICARWASH@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TUAN NGUYEN at (**407**) **929-8840**
Name of Person 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

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>
MGR	TUAN NGUYEN	4847 N POWER DRIVE ORLANDO, FL 32818	<input checked="" type="checkbox"/> Add <input 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
			<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.)*

New Registered Agent

Dated 10/19, 2010



Signature of a member or authorized representative of a member

TUAN NGUYEN

Typed or printed name of signee