## L08000053736

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**EXAMINER** 



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SECRETARY OF STATE
ALLAHASSEE, FI ORIGINA

## **COVER LETTER**

TO: Registration Se Division of Cor					
SUBJECT:	ALL AMERICAN (Name of Limit	PARKING, LL	<u>c</u>		
	(Name of Limit	ed Liability Company)			
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.			
Please return all correspo	ndence concerning this matter to	o the following:			
	THOMAS 1	MC CARTHY (Name of Person)			
	Au Americ	CAN PARKINH (Firm/Company)	LLC 3	20 SI SI	
	14401 3	(Firm/Company)  MILITARY	TRAIL APS	ECRETARY FIGURE COST	Π
	DERRAY B	(Address)  EACH   FL (City/State and Zip Code)	33484 E	O A II:	ון כ
		(City/State and Zip Code)			
For further information c	oncerning this matter, please cal	II:		•	
	UCCARINY	at ( <u>561)</u> 85	9 - 2590		
(Name o	of Person)	(Area Code & L	Daytime Telephone Number	r)	
Enclosed is a check for the	ne following amount:				
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enc	closed) Certified	te of Status &	1)

**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

ALL AMERICAN PARKING, 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		were filed on <u>6/0</u>	02 708 3	and assigned				
Florida document number <u>LoBoooo 53</u>	936.		02 FOR SUN 3					
This amendment is submitted to amend the follow	ing:		TARY OF ASSEE, F	1 ' '				
A. If amending name, enter the new name of the	<u>e limited liabi</u>	lity company here:	A II: I	<del></del>				
The new name must be distinguishable and end with to "L.L.C."	he words "Limit	ed Liability Company," t	he designation "LLC"	·				
Enter new principal offices address, if applicab	le:	14401 S. ADT EZO DEZRAY 1	MILITAR	YT RAIL				
(Principal office address MUST BE A STREET)	ADDRESS)	APT EZO	2	- 0016				
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>	14401 S. APT EZO DEZRAY 1						
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:	1Hom.	AS MC CARTA  S. MILITA  (Enter F  (City)	74.5					
New Registered Office Address:	14401	S. MILITA (Enter B	RY TEML	# EZOZ				
	DERRAY	Beach	, Florida	3484				
		(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 Title Title Name | <u>Address</u> **Type of Action** BRYAN M. GEOGERRY **□** Add Remove ☐ Add Remove Add 🗂 Remove 🗂 Add ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary Dated Signature of a member or authorized representative of a member BRYAN M. GEOFFREY

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00