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TALL AMASSEE, FLORIB.

N. O SEP 15 2009



LAW OFFICE OF SHERMAN M. BROD

213 E. DAVIS BLVD. TAMPA, FLORIDA 33606 e-mail: <u>brod@usa.com</u>

GENERAL PRACTICE BUSINESS, ESTATES PERSONAL INJURY TRIAL PRACTICE PLEASE REPLY TO:

P.O. Box 18877 TAMPA, FLORIDA 33679-8877 PHONE: (813) 251-4389 TOLL FREE: (800) 583-7629 MOBILE (CELL): (813) 295-8080 FAX (TOLL FREE): (866) 520-4125

September 10, 2009

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

LLC Name:

Document No:

RLG Motors, LLC

L08000065119

Dear Sir/Madam:

Enclosed herein is your form <u>Cover Letter</u> for submitting Articles of Amendment to Articles of Organization of the above noted limited liability company, together with the original and one copy of the <u>Articles of Amendment to Articles of Organization of RLG Motors, LLC.</u>

Also enclosed is my trust account check in the amount of \$55.00 for the filing fee and one certified copy.

Finally, I have enclosed a stamped pre-addressed return envelope for your convenience.

Thank you for your assistance in this matter. If you have any questions, please call me at (813) 295-8080.

Sincerely,

Sherman M. Brod

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Enclosures and the second of t

cc: RLG Motors, LLC

COVER LETTER

	Registration Sect Division of Corpo								
SUBJEC	T:	RLG M	OTORS, LLC						
,			led Liability Company						
The enclosed Articles of Amendment and fee(s) are submitted for filing.									
Please ret	urn all correspond	dence concerning this matter	to the following:						
Sherman M. Brod, Attorney									
Name of Person									
Law Office of Sherman Brod									
Firm/Company									
Tampa, FL 33679-8877									
City/State and Zip Code									
	brod@usa.com								
E-mail address: (to be used for future annual report notification)									
For furthe	r information con	cerning this matter, please ca	all:						
Sherman Brod				295-8080					
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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RLG MOTORS, LLC

O9 SEP 14 PM 2: 00

(<u>Name of the Limited</u> (A	<u>Liability Compa</u> Florida Limited I	<u>ny as it now appear</u> Liability Company)	rs on our records.	L. PLORIDA		
The Articles of Organization for this Limited Li Florida document number		were filed on	July 7, 2008	and assigned		
This amendment is submitted to amend the follo	owing:					
A. If amending name, enter the new name of	the limited liab	ility company her	<u>e</u> :			
The new name must be distinguishable and end with "L.L.C."	h the words "Limi	ited Liability Compa	ny," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applica	10156 N. Florida Ave.					
(Principal office address MUST BE A STREE	T ADDRESS)	Tampa, FL 33612				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	13014 N. Dal	e Mabry Hwy., Su วลาล	ite 110			
B. If amending the registered agent and/or the new registered of	or registered of	fice address on o		ne name of the nev		
Name of New Registered Agent:	stered Agent: Sherman M. Brod, Attorney					
New Registered Office Address:	213 E. Davi	213 E. Davis Blvd.				
	Enter Florida street address					
		Tampa	, Florida	33606		
		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.

f 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. **Address** Name | Type of Action Mark Robles MGRM 4 David Lane _ Add Ronkonkoma, NY 11779 US ✓ Remove Joseph A. Robles MGRM 8505 Beth Court ✓ Add Odessa FL 33556 Remove ☐ Add Remove ∏Add Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 August 2009 Dated __ Signature of a member or authorized representative of a member Joseph A. Robles Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00