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(Requestor's Name)				
(Address)				
(Ac	idress)			
(Ci	ty/State/Zip/Phone	⇒ #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
ALLAMASSEF FLORIDA

D. BRUCE

OCT 0 3 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Con		1	, ,		
SUBJECT: Planet				•	
	(Name of Lim	ited Liability Company)	_		
	Amendment and fee(s) are sub ondence concerning this matter	-			
	Danny A Wilder				
		(Name of Person)			
	Planet Auto World LLC				
		(Firm/Company)			
735 West Broward Blvd				SEC ALL	
	 	(Address)			П
	Fort Lauderdale/Florida	33312		ARY ARY NSEE	
		(City/State and Zip Code)		e, FI	Ö
For further information of	concerning this matter, please o	all:		2: 29 TATE ORIDA	FILED
Danny A Wilder		at (_954_ ₎ 895-5907			
(Name	of Person)	(Area Code & Daytime T	elephone Number)		
Enclosed is a check for t	he following amount:				
☑ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Certificate of Certified Conditional of Certified C	of Status &	ı
MAIL	ING ADDRESS:	STREET/COURIER	ADDRESS:		

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION OF**

Planet Auto World LLC		
(<u>Name of the Limite</u> (d Liability Company as it now appe A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited I	Liability Company were filed on Ju	and assigned
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name	of the limited liability company h	ere:
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	08 TAL
(Principal office address MUST BE A STRE	ET ADDRESS)	CRE LA
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> </u>	-2 PH 2: 29 ARY OF STATE ASSEE, FLORDA
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter the name of the new
Name of New Registered Agent:	Donna F Wilder	
New Registered Office Address:		
	·	Enter Florida street address)
	Pompano Beach (City)	, Florida 33062
New Registered Agent's Signature, if changing	• •	(Zip Code)

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 Type of Action **Address** Title Name Gerald A Wiseberg MGRM 19090 Cloister Lake Lane ■ Add Remove Boca Raton, Florida 33498 USA ☐ Add Remove Add 🗂 Remove ☐ Remove _ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated September 24 2008

Typed or printed name of signee

Danny A Wilder

Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00