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C. LEWIS

DEC 2 3 2008

EXAMINER

## COVER LETTER

TO: **Registration Section Division of Corporations** 

ALL TUNE AND LUBE

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

IRENE RODRIGUEZ
(Name of Person) US ALL TUNE AND LUBE LLC (OBA) ALL TUNE AND LUBE
(Firm/Company) 360 N STATE RD 434-UNITB ALTAMONTE SPRINGS FL, 32714

For further information concerning this matter, please call:

1902 at (407, 283, 9603 (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

FILED

2000 DEC 22 PM 3: 16

GECRETARY OF STATE TALLAHASSEE. FLORIDA

US ALL TUNE	AND LUBE	LLC	
( <u>Name of the Limited Liab</u> (A Florio	lity Company as it now appe la Limited Liability Company	ears on our records.	
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on _	July 25,2	Mand assigned
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company h	ere:	
Auto Tech Leads	er LLC		
The new name must be distinguishable and end with the "L.L.C."		ipany," the designation "l	LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET AD		V. State P B nonte Spring	13 434 15, FL 32714
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_603 A 		+
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, enter t	he name of the new
Name of New Registered Agent:		pdriguez	
New Registered Office Address:	603 Alfani S	竹(eて Enter Florida street add	dress)
$\widehat{\mathcal{L}}$	Avenport (City)	, Florida	33896 (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)

MGR = Manager MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action Irene Rodriguez
Reinaldo Rodriguez Owner\_ Remove r Add ☐ Remove Remove ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 18th 2008 Signature of a member or authorized representative of a member Rodriquez
Typed or putted name of signee

If aniending 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:

Page 2 of 2

Filing Fee: \$25.00