

208000095283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

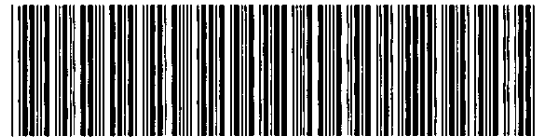
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200157993622

07/01/09--01002--021 \*\*25.00

RECEIVED

09 JUN 30 PM 3:59

FILED

09 JUN 30 PM 4:08

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 30 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Mackaydin Motors 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:

Clara Sowell

Name of Person

Mackaydin Motors LLC

Firm/Company

8025-A Anderson Road

Address

Tampa FL 33634

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luigi Mollo

Name of Person

at (813) 270-7954

Area Code & Daytime Telephone Number

FILED  
09 JUN 30 PM 4:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Mackaydin Motors 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 Liability Company were filed on 10/8/08 and assigned  
Florida document number L08000095283

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Affordable Autos of Tampa LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8025A Anderson Rd.  
Tampa FL 33634

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

Luigi Mollo

New Registered Office Address:

6342 New Town Circle B-3

Enter Florida street address

Tampa, Florida 33615  
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.

[Signature]  
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

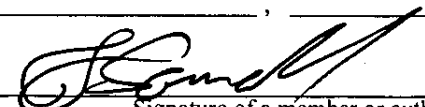
Title	Name	Address	Type of Action
MGRM	Tim Sowell	605 Hampton Ave Tallahassee FL 32310	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Clara Sowell	605 Hampton Ave Tallahassee FL 32310	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Luigi Mollo	6342 Newtown Circle B-3 Tampa FL 33615	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Luigi Mollo	6342 Newtown Circle B-3 Tampa FL 33615	<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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FILED**  
09 JUN 30 PM 4:08  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Dated \_\_\_\_\_

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Tim Sowell  
\_\_\_\_\_  
Typed or printed name of signee