L08000099973

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SECRETARY OF STATE

COVER LETTER

ΓO: Registration Section Division of Corporations	ů
SUBJECT: EAGLE LYE IMPORTS LL C. 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:	
JOHN MOTTOLA Name of Person	
Name of Person	
EAGLE EYE IMPORTS, LLC. Firm/Company	
6513 COTTAGE LANE	
SAINT CLOUD, FL 34771 City/State and Zip Code	
City/State and Zip Code	•
For further information concerning this matter, please call:	
Name of Person at (407) 325-3836 or Area Code & Daytime Telephone Number	407·593-1172
, , ,	
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	ite of Status &

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

CHOIC EXE IMPORTS, LL	<u>. C</u>
(Name of the Limited Liability Company as it now appears o (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Company were filed on	- 23 - 200 8 and assigned
This amendment is submitted to amend the following:	·
A. If amending name, enter the new name of the limited liability company here:	
MOTORDOG69, L.L.C.	of Organization for this Limited Liability Company were filed on 10-23-208 and assigned ament number L08000099973 ment is submitted to amend the following: ding name, enter the new name of the limited liability company here: MOTORDOGG9 L.L.C. te must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation principal offices address, if applicable: ffice address MUST BE A STREET ADDRESS) mailing address, if applicable: dress MAY BE A POST OFFICE BOX) miding the registered agent and/or registered office address on our records, enter the name of the new agent and/or the new registered office address here: The provided street address is the provided street address in the name of the new agent and/or the new registered office address here: The provided street address is the provided street address in the name of the new agent and/or the new registered office address here: The provided street address is the provided street address in the provided street address is the provided street address in the provided s
The new name must be distinguishable and end with the words "Limited Liability Company, "L.L.C."	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
registered agent and/or the new registered office address here:	records, enter the name of the new
Name of New Registered Agent:	11 SE
New Registered Office Address: Enter	^SS + =
City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	8: 50 STATE LORIDA
I hereby accept the appointment as registered agent and agree to act in this capa	acity. I further agree to comply with

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	nager Janaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
		•	Remove
			Add Remove
			Remove
			Add Remove
			Add
			Remove
			
			Add
			Remove
). If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if necessar	ry.)
			, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
			SECRETARY TO ANY
			`>
Dated	11-1-2009.	2009	SS
Janu	,		
	Signature of a	nember or authorized representative of a member	M 8:50
	Signature of a-n	TOHO MOTTOLA	> ''' =
		Typed or printed name of signee	

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Filing Fee: \$25.00