

L0800001011910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

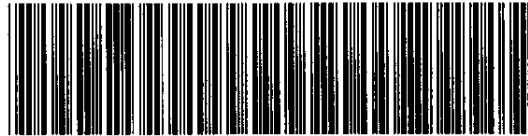
Special Instructions to Filing Officer:

L. SELLERS

OCT 27 2010

EXAMINER

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10/25/10--01023--014 **30.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 OCT 25 PM 1:15

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SKYE IMPORT AUTO BODY 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:

DAVID LUTHER WOODWARD

Name of Person

THE LAW OFFICES OF DAVID LUTHER WOODWARD PA

Firm/Company

POST OFFICE BOX 4475

Address

PENSACOLA, FLORIDA 32507-0475

City/State and Zip Code

DLW@WOODLAW.PRO

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

For further information concerning this matter, please call:

David Luther Woodward

Name of Person

at (850)

456-4010

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**

SKYE IMPORT AUTO BODY 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 October 30, 2008 and assigned
Florida document number L08000101690.

This amendment is submitted to amend the following:

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

no change

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)

1415 Lemhurst Road

Pensacola

Florida 32507

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Post Office Box 4475

Pensacola

Florida 32507-0475

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:

David Luther Woodward

New Registered Office Address:

1415 Lemhurst Road

Enter Florida street address

Pensacola

, Florida

City

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10 OCT 25 PM 1:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity, 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Tina Voytko	1727 Brooke Beach Drive	<input checked="" type="checkbox"/> Add
		Navarre	<input type="checkbox"/> Remove
		Florida 32566	
MGRM	Scott Voytko	1016 Great Oaks Drive	<input type="checkbox"/> Add
		Gulf Breeze	<input checked="" type="checkbox"/> Remove
		Florida 32563	
			<input 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.)*

Dated October 23, 2010



Signature of a member or authorized representative of a member

Tina Voytko

Typed or printed name of signee