L09000009548

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C. LEWIS

NOV 5 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Tire Dept Group, 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:			
Name of Person			
Stevens > 66/duyn, P.A.			
2 South University Drive, #315			
Plantation FL 33324 City/State and Zip Code			
WFOOTREDEDOTEL.COM E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Person at (954) 458-9393 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)}} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2009 NOV -4 PM :117
SECRETARY OF STATE

Zip Code

Name of the Limited Liability Companion (A Florida Limited L	OUP LLC SECRETARY OF STATE ny as it now appears on our records, ALLAHASSEE, FLORID liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L090000 9548</u> .	were filed on $01/29/2009$ and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limit" L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	117 W. Hallandale Beach Blvd Hallandale Beach, FL 33009
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	117 W. Hullandale Beach Blvd Hallandale Beach, Fr 33,008
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: New Registered Office Address: Name of New Registered Agent: New Registered Office Address:	W. Hallandale Beach Blud Enter Florida street address dale Beach, Florida 33009

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.

City

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** Title Name Address ☐ Add Remove ∏ Add Remove ☐ Add Remove ∏Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Shlomi Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00