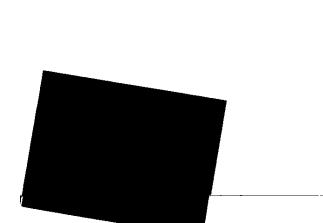
# L09000017102

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(Address)				
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09 JUN 22 AMID: 15

SECRETARY OF STATE OIVISION OF CORPORATIONS

T. HAMPTON

Jun 2 3 2009

**EXAMINER** 

# **COVER LETTER**

SUBJECT:	EDDIE'S AU	JTOTECH44 L.L.C.				
Sobole 1.	Name of Limi	ted Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	JOHN MORENO					
EDDIE'S AUTOTECH44 L.L.C.						
		Firm/Company				
		7000 PINES BLVD Address				
		Address				
PEMBROKE PINES, FL 33024  City/State and Zip Code						
		·				
		to be used for future annual report notifica	ation)			
For further information	concerning this matter, please of	call:				
	HN MORENO		85-9471			
Name	of Person	Area Code & Daytime	Telephone Number			
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS:		STREET/COURIE	R ADDRESS:			

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

Registration Section
Division of Corporations

TO:

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

To whom it may concern:

Attention: Division of Corporations

Please mail the letter of acknowledgement to the address listed below:

Thank you

John Moreno 7070 NW 177th Street #106 Hialeah, FI 33015 786-285-9471



### RECEIVED

09 JUN 22 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

June 1, 2009

JOHN MORENO 7000 PINES BLVD PEMBROKE PINES, FL 33024

SUBJECT: EDDIE'S AUTOTECH44 L.L.C.

Ref. Number: L09000017102

We have received your document for EDDIE'S AUTOTECH44 L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 809A00018293

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EDDII (Name of the Limited L (A F		TECH44 L.L.C.  TY AS IT NOW APPEARS OF ITALIENT TO THE PROPERTY OF THE PROPERT	our records.)	····	
The Articles of Organization for this Limited Liab Florida document number L09000171		were filed on	02/20/2009	and as	signed
This amendment is submitted to amend the follow	ving:	·			
A. If amending name, enter the new name of t	he limited liab	ility company here:			
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company,	'the designation "L	LC" or the	abbreviation
Enter new principal offices address, if applicat	ole:	7000 PINES BL	VD .	<u>ئ</u> چـــــ	SECR
(Principal office address MUST BE A STREET	ADDRESS)	PEMBROKE PII	NES, FL 33024	1 2	OF SECOND
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	ovi	7000 PINES BL'		\$ 5 5	ED OF STATE ORPORATIONS
·					
B. If amending the registered agent and/or registered agent and/or the new registered officers.			records, <u>enter tl</u>	he name	of the new
Name of New Registered Agent:	JOHN MORENO				
New Registered Office Address:	7000 PINES BLVD  Enter Florida street address				
			rioriuu sireei uuur		
	PEME	BROKE PINES  City	, Florida	3302 Zip Coa	
New Registered Agent's Signature, if changing Re	gistered 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

Page 1 of 2

# MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action				
MGR	JOHN MORENO	7070 NW 177TH STREET #106 HIALEAH, FL 33015	Add Remove				
MGR_	NIDIA MORENO	7070 NW 177TH STREET #106 HIALEAH, FL 33015	Add Remove				
MGR	EDDIE A LOPEZ JR	12526 SW 144 TERRACE MIAMI, FL 33186	Add Remove				
MGR	EDDIE A LOPEZ SR	12526 SW 144 TERRACE MIAMI, FL 33186	Add Remove				
			Add Remove				
			Add Remove				
D. If amendin	g any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	SECRETARY DIVISION OF C				
			ED STATE Y OF STATE ORPORATIONS ORPORATIONS				
Dated	6 15 09 Jahr. Ho	bienes					
Signapure of a member or authorized representative of a member  JOHN HORENO  Typed or printed name of signee							

Page 2 of 2