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COVER LETTER

10:	Division of Corpor					
SUBJE	CT:	BAY AREA	AUTOMOTIVE LLC			
SOBJE	<u> </u>	Name of Limi				
The enc	losed Articles of Arr	nendment and fee(s) are sul	omitted for filing.			
Please r	eturn all corresponde	ence concerning this matter	to the following:			
	_	`	YANET RODRIGUEZ			
			Name of Person			
		BAY	AREA AUTOMOTIVE LLC			
	Firm/Company					
		9609 WARE CIR				
	·		Address		2016 TALL	٠.
			TAMPA/FL 33619		2010 OCT 15 SECRETARY TALLAHASSER	ैं स
	•		City/State and Zip Code		1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5	
	-	SAN E-mail address: (ITO363@YAHOO.COM to be used for future annual report notificat	ion)		
For furt	her information conc	erning this matter, please o	call:		PH 2: 25 Y OF STATE EE. FLORIDA	O
	YANET I	RODRIGUEZ	at (813) 41	2-9688	ъ О	
Name of Person		Area Code & Daytime T	elephone Number			
Enclose	d is a check for the f	ollowing amount:				
	00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIER Registration Section Division of Corporati- Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	A AUTOMOTIVE LLC	·····
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our rec Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability (Company were filed onAPRIL 10), 2009 and assigned
Florida document numberL09000034784	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the wo	ords "Limited Liability Company," the desi	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		7A S
(Principal office address MUST BE A STREET ADD	RESS)	
		ASSET IS
Enter new mailing address, if applicable:	9609 WARE CIR	
(Mailing address MAY BE A POST OFFICE BOX)	TAMPA FL 33619	
		DE 25
B. If amending the registered agent and/or registered agent and/or the new registered office add		s, enter the name of the new
Traine of Fred Registered Figure	IET RODRIGUEZ	
New Registered Office Address: 90	e09 Ware Cir	
<u></u>	e09 Ware Cir Enter Florida: Ampa 76 33619, Fl	orida
	l 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, thereby confirm that the limited liability company has been notified in writing of this change.

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> **Address Type of Action MGRM HUMBERTO DIAZ-ABREU** 3409 CLAY ST ☐ Add ✓ Remove TAMPA FL 33605 ☐ 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.) OCTOBER 11 2010 Dated Signature of a member or authorized representative of a member **HUMBERTO DIAZ-ABREU** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00