

Office Use Only

G. MCLEOD

EXAMINER



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02/03/11--01029--021 **25.00

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SECRETARY OF STATE TALL AHASSEE

G. MCLEOD

FEB - 4 2011

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Mad	Motors LLC	
50b02c1.		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
		Michael D Herbert	
		Mad Motors LLC	
3388 Fowler St.			
	 	Address	
		Ft. Myers, Fl. 33901	
		City/State and Zip Code	
		Mike@madmotors.net (to be used for future annual report notif	ication)
For further information	concerning this matter, please	•	Cattony
rot tuttiet information	concerning this matter, please	can.	
Michael Herbert		at (<u></u> -)	939-0776
Name	of Person	Area Code & Daytim	e 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	Section 1 Section 1 Section 2 Sectio
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURI Registration Section Division of Corporn Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

N	lad Motors LLC			
(Name of the Limited Liabil) (A Florid	lity Company as it now appea la Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability	Company were filed on	05/13/2009	and assigned	
Florida document numberL09000047033	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liability company he	<u>re</u> :		
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Compa	any," the designation "l	LLC" or the abbrevia	_ ıtion
Enter new principal offices address, if applicable:			TALL	_
(Principal office address MUST BE A STREET ADD	DRESS)		AHAS	Π
		· -	SE SE	=
Enter new mailing address, if applicable:			- For 18 C	Π D
(Mailing address MAY BE A POST OFFICE BOX)		··	AI -	_
D. If among the state of the st				_
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		our records, <u>enter 1</u>	the name of the f	<u>1ew</u>
Name of New Registered Agent:				_
New Registered Office Address:				_
	Enter Florida street address			
	City	, Florida	Zip Code	-
New Registered Agent's Signature, if changing Registe	red 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

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
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
<u>v</u>	le are changing Jaque W. Cahn fro	m VP to a Managing Member as requested	<u>1</u>
<u>b</u>	y the DMV for our dealer license		_
			_
			
Dated	Feb. 2 20 Night of a member Signature of a member	or authorized representative of a member	·
	Mi	chael D. Herbert	
	Typed	or printed name of signee	

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Filing Fee: \$25.00