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EXAMINER



100156008501

10/13/09--01026--023 **25.00

09 OCT 29 PM 2: 38

Siet

COVER LETTER

Division of Corporations				
SUBJECT: Daytona Auto Group ULC Name of Limited Liability Compley				
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Christopher W. Brown Name of Person				
Firm/Company				
440 Fentress Blvd Address				
Daytona Beach FL 32-114 City/State and Zip Code Christophorbean.com Busia address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Christopher w. Brown at (386) 847.72102 Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$				

MAILING ADDRESS:

TO:

Registration Section

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

	OUD LLC		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	pany as it now appears on or d Liability Company)	<u>ır records.</u>)	
The Articles of Organization for this Limited Liability Compa	any were filed on $8/1$	3/09 and assigned	
Florida document number <u>L09000078437</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and end with the words "L" "L.L.C."	imited Liability Company," the	e designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	
		SICH	
Enter new mailing address, if applicable:	,	FIL WOF CO	
(Mailing address MAY BE A POST OFFICE BOX)		3 300	
		? 3€	
		8 10	
B. If amending the registered agent and/or registered		ords, enter the name of the new	
registered agent and/or the new registered office address h	<u>ere</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	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, 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

'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
MGR	Anthony Mugone	112 Spinnaker Journ Baytona	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_
			_
	ALA	7	
Dated	Signature of member of	r authorized representative of a member	
	Christoph & W. Bruwn Typed or	printed name of signee	

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Filing Fee: \$25.00