

L09000079951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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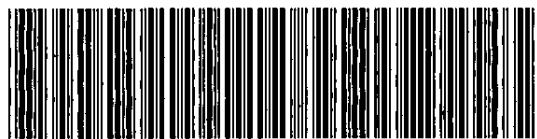
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON

OCT 14 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Family Auto Service Center, 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:

Cheryl Valentino

Name of Person

Family Auto Service Center, LLC

Firm/Company

40200 US Highway 19 N.

Address

Tarpon Springs, FL 34689

City/State and Zip Code

cherylvl13@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheryl Valentino

Name of Person

at (727)

943-9939

Area Code & Daytime 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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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**

Family Auto Service Center, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8/19/09 and assigned
Florida document number L09000079951.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

40200 US Highway 19 N.

Tarpon Springs, FL 34689

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	John T. Zielenbach	15802 Amberly Dr. Tampa, FL 33647	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Cheryl Valentino	40200 US Highway 19 North Tarpon Springs, FL 34689	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated October 8, 2009

Cheryl Valentino

Signature of a member or authorized representative of a member

Cheryl Valentino

Typed or printed name of signee

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ASSIGNMENT OF MEMBERSHIP INTEREST

FOR TEN DOLLARS AND OTHER GOOD AND VALUABLE CONSIDERATION, Vested Motors III, LLC, a Florida limited liability company, hereby (a) represents and warrants to Cheryl Valentino that it is the owner of One Hundred Percent (100%) of the Membership Interests in Family Auto Service Center, LLC, a Florida limited liability company, and (b) does hereby sell, assign and transfer unto Cheryl Valentino, One Hundred Percent (100%) of the Membership Interests in Family Auto Service Center, LLC, a Florida limited liability company, and (c) represents and warrants to Cheryl Valentino that no certificates of membership in Family Auto Service Center, LLC have been issued and no operating agreement of Family Auto Service Center, LLC has been executed or otherwise in effect.

Dated October 12, 2009.

In the Presence of:

Jane Sewart
Robert L. Marvin

VESTED MOTORS III, L.L.C.,
Sublessor

By: [Signature]
John T. Zielenbach, Manager

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