1090000838239

(Requestor's Name)						
(Ad	dress)	·				
(Ad	dress)					
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Bu	siness Entity.Na	me) -				
(Document Number):						
Certified Copies	_ Certificate	s of Status				
Special Instructions to Filing Officer:						
,	,					

Office Use Only



000162673120

11/16/09--01041--003 **60.00

09 NOV 16 PH 5: JI SECRETARY OF STATE VLLAHASSEE, FLORIE S. HAWKES

NOV 17 2009

EXAMINER

COVER LETTER

ТО:	Registration Section Division of Corpor					
SUBJE	CT:	DNA Custor	n Automotive LLC			
		Name of Limit	ed Liability Company			
The enc	losed Articles of Am	endment and fee(s) are sub	mitted for filing.			
Please re	eturn all corresponde	nce concerning this matter	to the following:			
	-		Kylea Duszynski			
			Name of Person			
		DNA	Custom Automotive LL	.C		
Firm/Company						
2110 Harding St.						
	•		Address			
Hollywood, FL. 33020 City/State and Zip Code dnacustomautomotivellc@hotmail.com						
For furth	ner information conc	erning this matter, please ca	all:			
	Kylea	Duszynski		420-818		
	Name of Pe	rson	Area Code & D	aytime Telephone	Number	
Enclose	d is a check for the fe	ollowing amount:				
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) C	0.00 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

(Name of the Limited (A	A Custom A Liability Compa Florida Limited I	utomotive LL ny as it now appea Liability Company)	C rs on our records.)					
The Articles of Organization for this Limited L	iability Company	were filed on	August 31, 2009	and assigned				
lorida document number L09000083829								
This amendment is submitted to amend the following	owing:			E. S. P.				
A. If amending name, enter the new name o	f the limited liab	oility company he	<u>re</u> :	D.				
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Comp	any," the designation "l	LLC" or the abbreviation				
Enter new principal offices address, if applicable:		2110 Harding St.						
(Principal office address MUST BE A STREET ADDRESS)		Hollywood, FL						
		33020						
Enter new mailing address, if applicable:	2110 Harding	g St.						
(Mailing address MAY BE A POST OFFICE	Hollywood, F	·L						
	33020							
B. If amending the registered agent and/ registered agent and/or the new registered of	ffice address her	<u>re</u> :	our records, <u>enter (</u>	the name of the new				
Name of New Registered Agent:	Kylea Duszynski							
New Registered Office Address:	2110 Hardir							
	Enter Florida street address							
		Hollywood	, Florida	33020				
		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 Charging 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 Title **Name** Address Type of Action MGR STORRS PERRETTA 2681 SW 51ST STREET Add ✓ Remove FORT LAUDERDALE, FL 33020 US MGR **BRETT PERRETTA** 2681 SW 51ST STREET FORT LAUDERDALE, FL 33020_US MGR KYLEA DUSZYNSKI 5110 SW 26TH AVE **FORT LAUDERDALE, EI** 33312_US \Box Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 10th 2009 Dated_ Signature of a member or authorized representative of a member William Henson

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee