

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ULTIMATE AUTO BODY, LLC

Certificate of Status 0 Certified Copy 0 Page Count 03 **Estimated Charge** \$25.00

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3052201440

LAZARUS

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To: 3052201440

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H10000101996

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ULTIMATE AUTO BODY, LLC.						
(Name of the Limiter	I Liability Company as it now appears Plorida Limited Liability Company)	on our records.)				
,						
The Articles of Organization for this Limited L	iability Company were filed on	01/12/2010	and assigned			
Florida document number LL0000004						
Florida document number						
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of	f the Umited liability company here:					
A. Il sillending thane, cited the new hame of	the mater naphter company have.					
				_		
The new name must be distinguishable and end wi	th the words "Limited Lisbility Company	," the designation "l	LLC" or the abbrevi	alion		
ماها در ا						
Enter new principal offices address, if applie	able:			•		
(Principal affice address MUST BE A STREET ADDRESS)						
			· · · · · · · · · · · · · · · · · · ·	-4-		
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE	<u> </u>					
				_		
B. If amending the registered agent and/		records, <u>enter i</u>	he name of the	non		
registered agent and/or the new registered of	Mice address here:		5	**		
			₩0 →			
Name of New Registered Agent:	THOMAS SCOTTO			-		
The second of th	12975 NE 14TH AVENUE		PR PR			
New Registered Office Address:	Enter Florida street addressor					
		Promitt in eer and	<u>(***</u> };;;;₹ ∞	3		
	NORTH MIAMI	, Florida	∂32161 <u>>></u>			
:	City		ZID Code	(man)		
New Registered Agent's Signature, if changing Registered Agent:			97 C	Victor 1		
	_ _		87 t			
I hereby accept the appointment as registere	d agent and agree to act in this cape	icity. I fiother agr	ee to comply with	I		
the provisions of all statutes relative to the p	roper and complete performance of	my duties, and I a	m familiar with a	nd		
accept the obligations of my position as regin	stered agent as provided for in Chap	ter 608, F.S. Or,	if this document to	7		
being filed to merely reflect a change in the to company has been notified in writing of this	change	mjirmi that the lim	шеа навину			
	_ Tanto					
	If Changing Registered Agent	Simulate of New Per	is bread Assumb			

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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 = Man MGRM = Ma	nger anaging Member	1	ţ
Title	<u>Name</u>	Address	Type of Action
MGRM	SCOTTO, THOMAS	12975 NE 14TH AVENUE NORTH MIAML EL 33161	Add Remove
MGRM	SCOTTO, SABRINA	12975 NE 14TH AVENUE NORTH MIAMI, FL 33161	Add Remove
			Add Remove
	·		∧dd Rcmove
			Add Remove
 .			Add Remove
D. If amendi	ng any other information, ente	er change(s) here: (Attach additional sheets, if necessary.)	,
			- -
	APRIL 27	2010	 -
Dated	Cabrina	Catto	
-		a member or authorized representative of a mumber	
	-	SABRINA SCOTTO	
, -		Typed or printed nume of signee	

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