L10000032710

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EXAMINER



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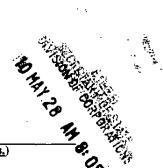
:'

Registration Section
Division of Corporations

TO:

SUBJECT:	PB Aut	comotive, LLC			
Jobaber.	Name of Limited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	3		
Please return all corresp	oondence concerning this matter	to the following:	•		
		Kari Dana	,		
	Kori Bonn Name of Person				
		PB Automotive, LLC Firm/Company	<u>, </u>		
	42	• -			
		Dow Road, Unit#208			
		Address	μ		
	N	Melbourne, FL 32934			
		City/State and Zip Code			
		automotive@cfl.rr.com to be used for future annual report no			
	·	·	uncaron)		
For further information	concerning this matter, please c	all:			
	Kori Bonn	at (_321_)	622-6934		
Name	of Person	Area Code & Dayti	ime 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 enclos			
			(additional copy is enclosed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			RIER ADDRESS:		
		Registration Section Division of Corp			
		Clifton Building 2661 Executive			
		Tallahassee, FL			

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



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

The Articles of Organization for t	nis Limited Liability Company w	ere filed on	March 25, 2010	_ and assigned
Florida document number	L10000032710			
This amendment is submitted to a	mend the following:			
A. If amending name, enter the	new name of the limited liabili	ty company he	<u>re</u> :	
The new name must be distinguishad	ole and end with the words "Limited	d Liability Comp	any," the designation "LL	C" or the abbreviation
Enter new principal offices add	ress, if applicable:			
(Principal office address MUST)	BE A STREET ADDRESS)			, <u>, , , , , , , , , , , , , , , , , , </u>
Enter new mailing address, if a	pplicable:			
(Mailing address MAY BE A PO	ST OFFICE BOX)			
B. If amending the registered registered agent and/or the new		ee address on	our records, <u>enter the</u>	name of the new
Name of New Registere	i Agent:			
New Registered Office	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
Mr MGR	Paul Bonn	4270 Dow Road, Unit#208 Melbourne, Fi_32934	Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	·		Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	_
			<u> </u>
		0	<u> </u>
Dated			******
	Signature of a memb	ey of authorized representative of a member Kori R. Bonn	
	Туре	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00