(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duningan Entity Marga)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
OCT <b>2 7</b> 2010



400187075194

10/26/10--01023--002 \*\*25.00

**EXAMINER** 

Office Use Only

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT: Drc	<del></del>	outops, llc			
	Name of Lim	ited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing			
	ondence concerning this matter	•			
rease return an corresp	ondence concerning this matter	to the following.			
	J. DAVI	O Peña			
		Name of Person			
	J. DAVÎ	D PENA, P.A.			
		Firm/Company		75. 22	
	701BECKLII	Avenue suite 10?	50	7117 7568 0 0 0 0	
	<del></del>	Address		2010 OCT 26 SECRETAR) TALLAHASSI	- 131
	miami, FL	. 33131			
	Divid Pouls	City/State and Zip Code		PM 4: 18 OF STATE E.FLORID	O
	_	MVISAUSA - COM to be used for future annual report notifica	tion)	M 4: 18 IF STATE FLORIDA	
For further information	concerning this matter, please of	eall:			
CONNE	)8. 7~L	275 272 E	560		
GINA F	of Person	at (305) 373 - 5 Area Code & Daytime T		<u></u>	
		,			
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)	Certified	te of Status &	osed)

### 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

MOTORS, LLC		
ability Company as it now appears orida Limited Liability Company)	on our records.)	
lity Company were filed on MA	and assig	ned
ng:		
e limited liability company here	:	
ne words "Limited Liability Compan		breviatio
e:		And The State of
ADDRESS)	HE CT	
<u></u>	SET OF	
registered office address on ou e address here:	ir records, <u>enter the name of</u>	the nev
Ente	er Florida street address	
Line		
City	, Florida Zip Code	
	ibility Company as it now appears orida Limited Liability Company)  lity Company were filed on The Company were filed on t	Itity Company as it now appears on our records.)  Itity Company were filed on MPRCh 31 2010 and assign and assign.  Itity Company were filed on MPRCh 31 2010 and assign and assign and assign.  Itity Company were filed on MPRCh 31 2010 and assign and ass

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = N MGRM =	Ianager ■ Managing Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>m25.</u>	NORPYA DEI CARM	21) GONZAKS BAMOO 701 BEICKUII LYEN MIAMIT, FL 331	NE SUIK 1650 N Add Remove
			Add Remove
			Add Remove
			Add Remove
			De Demove
			SSEE F SIAF
D. If am	ending any other information	on, enter change(s) here: (Attach additional sheets	; if necessary." **
Dated	October 22	2010.	
	Sign	ture of a member or authorized representative of a mem	ber
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00