

L10000058714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

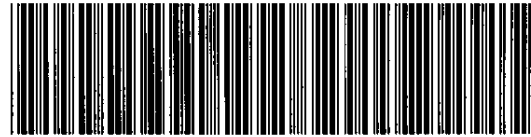
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 SEP 17 AM 11:07

T. HAMPTON

SEP 20 2010

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BEACH TYREX AIRPORT 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:

TONINO TONELLI

Name of Person

BEACH TYREX AIRPORT LLC

Firm/Company

1000 5th Street Suite #205

Address

Miami Beach, Fl. 33139

City/State and Zip Code

info@beachtyrex.com

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

For further information concerning this matter, please call:

William Tonelli

Name of Person

at ( 786 )

227-0758

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

BEACH TYREX AIRPORT LLC

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

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The Articles of Organization for this Limited Liability Company were filed on 06/02/2010 and assigned  
Florida document number L10000058714.

This amendment is submitted to amend the following:

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

BEACH TYREX AIRPORT LLC

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)

5201 NW 77 Avenue # 400,

Miami, FL. 33166

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1000, 5th Street Suite # 205

Miami Beach Fl. 33139

**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:

TONINO TONELLI

New Registered Office Address:

1000, 5th Street Suite #205 Fl. 33139

*Enter Florida street address*

Miami Beach

, Florida

33139

*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.*

*Tonino Tonelli*  
**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

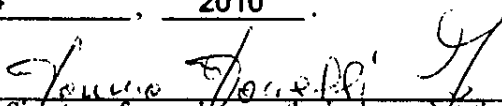
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	TONINO TONELLI	1000 5th Street Suite #205 Miami Beach FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	MANUEL DOS SANTOS	1610 COLLINS AVE SUITE 406 MIAMI BEACH FL 33139	<input type="checkbox"/> Add <input checked="" 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.)*

Add to the purpose: Car Dealer, Scooter Dealer, Jet Ski Dealer New and Used

Dated MIAMI 09/14, 2010.

  
Signature of a member or authorized representative of a member

TONINO TONELLI

Typed or printed name of signee

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS