

L10000073962

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

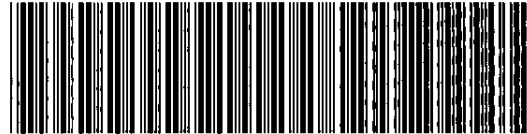
Special Instructions to Filing Officer:

Office Use Only

B. KOHR

MAY 17 2011

EXAMINER



100207653341

05/16/11--01056--007 **30.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 16 AM 10:48

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HD AUTOS 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:

DHRUVAM BHAICHANDEEN
Name of Person
HD AUTOS LLC
Firm/Company
4211 NORTH ORANGE BLOSSOM TRAIL STE C26
Address
ORLANDO FL 32804
City/State and Zip Code
hdautosllc@gmail.com
E-mail address: (to be used for future annual report notification)

FILED STATE
SECRETARY OF CORPORATIONS
11 MAY 16 AM 10:48

For further information concerning this matter, please call:

Dhruvam Bhaichandeen at **(407) 374-9775**
Name of Person 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**

HD Autos llc

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

FILED STATE
SECRETARY OF CORPORATIONS
11 MAY 16 AM 10:48

The Articles of Organization for this Limited Liability Company were filed on 03/17/2011 and assigned
Florida document number L10000073962.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

HD Autos llc
7857 Rex Hill Trail
Orlando FL 32804

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:

DHRUVAM BHAICHANDEEN

New Registered Office Address:

4211 NORTH ORANGE BLOSSOM TRAIL STE C26

Enter Florida street address

ORLANDO

Florida

32804

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

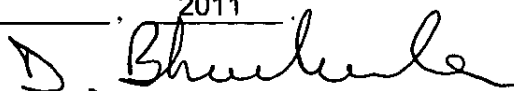
✓ If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------------|--|--|
| MGR | Michael Bhaichandeen | 4211 NORTH OBT STE C26 ORLANDO FL 32804 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGR | Kavim Bhaichandeen | 4211 NORTH OBT STE C26 ORLANDO FL 32804 | <input checked="" 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 |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated MAY 12th, 2011



Signature of a member or authorized representative of a member

DHRUVAM BHAICHANDEEN

Typed or printed name of signee