110000019194

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EXAMINER

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SECREDIALY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Fort Myly Paint & Body L.L.C. 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:		
Christopher P. Nolan Name of Person		
Fort Myers Paint & Body L.L.C.		
2081 Alicia Street		
Fort Myly FL 33901 City/State and Zip Code Firm yers paint hody @ Small Com B-mail address! (to be used for future annual report notification)		
For further information concerning this matter, please call:		
COLUN T. Molan at (239) 645-9199 Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount: \$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee \$ Certificate of Status \$ Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

++. Myers Paint	& Body LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)		
The Articles of Organization for this Limited Liability Company were filed on July 28th 2010 and assigned Florida document number <u>L10000079194</u> . (Sec of State) Causseaux		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation	
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)		
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	ete performance of my duties, and I am familiar with and rovided for in Chapter 608, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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:

MGRM = Managing Member **Title Type of Action** <u>Name</u> **Address** ☐ Add ☐ Remove ☐ Add Remove ☐ Add Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

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Filing Fee: \$25.00