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SECRETÁRY OF STATE

T. HAMPTON

AUG 3 1 2010

EXAMINER

COVER LETTER

Division of Corp		
SUBJECT: A	lens Pro Name of Limit	Trailer Service & Parts "LLC red Liability Company
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.
Please return all correspon	ndence concerning this matter	to the following:
		Name of Person
	Allens P	ro Trailer Service & Parts "LLC
	8547	16 Harts Rd
	<u>yulee</u> ,	City/State and Zip Code
	E-mail address: (to	o be used for future annual report notification
For further information co	oncerning this matter, please ca	all:
James Name of	A Tatum Person	at (904) 338-4497 Area Code & Daytime Telephone Number
Enclosed is a check for th	e following amount:	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Registr Divisio P.O. Bo	ox 6327	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appea Liability Company)	Service 3	Parts	·'LLC			
The Articles of Organization for this Limited Liability Company were filed on 8/16/20/0 and assigned Florida document number							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited lia	bility company he	<u>re</u> :					
The new name must be distinguishable and end with the words "Lin" "L.L.C."	nited Liability Compa	any," the designation "L	LC" or the abl	previation			
Enter new principal offices address, if applicable:							
(Principal office address MUST BE A STREET ADDRESS)			=	<u> </u>			
			A	<u>5</u> 5			
			6	05			
Enter new mailing address, if applicable:			30	ANY SEL			
(Mailing address MAY BE A POST OFFICE BOX)			7	<u></u>			
			င့	-22			
			 	SE			
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		our records, <u>enter tl</u>	ne name of	the new			
Name of New Registered Agent:							
New Registered Office Address:							
	Enter Florida street address						
		, Florida					
	City		Zip Code				
New Registered Agent's Signature, if changing Registered Agent	f•						

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 = Mar MGRM = M	nager Ianaging Member		
Title. MGRM	<u>Name</u>	Address	Type of Action
O <u>wner</u>	James A Tatum	85476 Harts Rd 4ulec FL 32097	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.)	S S S S S S S S S S S S S S S S S S S
			SECRETARY VISION OF CO 10 AUG 30
			CORPORATIONS 30 PM 3: 05
Dated	James Car Tellander Signature of a member	er or authorized representative of a member	
	James At Tex	d or brinted name of signee	

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Filing Fee: \$25.00