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## **COVER LETTER**

Division of Corp	orations				
SURJECT: 12T	AntoSales. won	~ LLC			
SOBOLET:	Name of Limit	へ しし ⊂ ed Liability Company ¬ ¬ ¬ A	TUCKER A	utus	
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.			
Please return all correspon	idence concerning this matter	to the following:			
	VAMES G	Tucker	Greg 11		
		Name of Person			
	12T Auto	SAIRS. COM LUC			
		Firm/Company			
	13 RACETR	Address			
		Address			
	ftwa Hon	bch fl. 32547 City/State and Zip Code Luck 7 @ Yaho o be used for future annual report noti			
		City/State and Zip Code			
	tucker	Luck 7@ Yaho	0. co M		
	E-mail address: (t	o be used for future annual report noti	fication)	E 2	
For further information co	oncerning this matter, please ca	all:		LAHA SEP	GG.OT
GREG TU	ider	at (850) 225-8	+83	ASS	CAC-COTT
Name of	Person	at ( 250 ) 225 - 8 Area Code & Daytin	ne Telephone Number	مـــ <del>الما</del>	ri'
				1-10	Bernauer Series
Enclosed is a check for the	e following amount:			3: 06 STATE ORIOS	مهر بعظ
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certified (	of Status &	sed)

MAILING ADDRESS:

Registration Section

TO:

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

Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Com- Florida document number <u>LIDOWS 1933</u> .	npany were filed on <u>08/33/10</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	55)
	20 20 CE
Enter new mailing address, if applicable:	AHE SEP
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office addres	ed office address on our records, enter the name of the nev
registered agent and/or the new registered office address	s nere.
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:

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 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 Type of Action <u>Title</u> **Address** <u>Name</u> MARM Christina & Tucker Remove Remove Remove Remove Remove

).' If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
 ated	8-31 , 2013
	Signature of a member or authorized representative of a member
	James GTucker
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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