

LI0000091587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

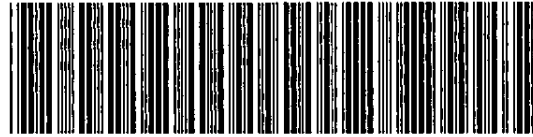
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300236220273

06/14/12--01017--001 \*\*35.00

FILED

12 JUN 29 PM 3:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NI C... JUL 2 - 2012

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SMART CAR WASH EXPRESS, 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:

**RAFAEL FERRER**

Name of Person

**F&S PROJECTS CORP**

Firm/Company

**1500 Weston Rd, Ste 200**

Address

**Weston, FL 33326**

City/State and Zip Code

**contacts@fandsprojects.com**

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

For further information concerning this matter, please call:

**RAFAEL FERRER**

Name of Person

at ( **954** )

**4829681**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 20, 2012

RAFAEL FERRER  
F & S PROJECT CORP.  
1550 WESTON ROAD STE. 200-7  
WESTON, FL 33326

SUBJECT: SMART CAR WASH EXPRESS, LLC  
Ref. Number: L10000091587

We have received your document for SMART CAR WASH EXPRESS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 012A00017085

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

FILED  
12 JUN 29 PM 3: 57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SMART CAR WASH EXPRESS, 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 08/31/2010 and assigned Florida document number L10000091587.

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) \_\_\_\_\_

**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: \_\_\_\_\_

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 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>
MGRM	ARMANDO GIL	472 NORTHEAST 167TH STREET NORTH MIAMI BEACH FL 33162	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	LEOPOLDO BAPTISTA	472 NORTHEAST 167TH STREET NORTH MIAMI BEACH FL 33162	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ARMANDO GIL	472 NORTHEAST 167TH STREET NORTH MIAMI BEACH FL 33162	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	HORACIO PARRA	472 NORTHEAST 167TH STREET NORTH MIAMI BEACH FL 33162	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	LEOPOLDO BAPTISTA	472 NORTHEAST 167TH STREET NORTH MIAMI BEACH FL 33162	<input checked="" 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)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FILED  
12 JUN 29 PM 3:57  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Dated JUNE 11, 2012

Signature of a member or authorized representative of a member

RAFAEL FERRER

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00