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J. BRYAN

NOV 2 2 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJE	CT:	Auto	o Tech LLC		
		Name of Limited Liability Company			•
The end	losed Articles o	of Amendment and fee(s) are su	bmitted for filing.		
Please r	eturn all corresp	pondence concerning this matte	r to the following:		
			Gregory J Staab Jr		
			Name of Person		
Auto Te			ech LLC dba Cars Co	mpany	10 MOV 19 AM 11: 52 SECRETARY OF STATE TALLAHASSEE, FLORID
			Firm/Company		SER E
			2173 Hwy 19 N		E. F. F. S.
			Address		92 52 20 52
			Perry Fl 32347		
			City/State and Zip Code		_
		me	chmike70@yahoo.co	m	
			to be used for future annual rep	ort notification)	
For furt	her information	concerning this matter, please of	call:		
	Gre	gory J Staab Jr	at (_ 850)	223-1230	
Name of Person		Area Code & Daytime Telephone Number		er	
Enclose	d 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 e	nclosed) Certifie	ate of Status &
	MAIL	LING ADDRESS:	STREET/O	COURIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

•	TO		O MON 19 AM 11:52
ARTICLES:	OF ORGANIZAT	ION	2000年
	OF		
			福山
Aut	o Tech LLC		Side of O
(Name of the Limited Liability (A Florida Li	Company as it now appea	rs on our records.)	
(A Florida Li	mited Liability Company)		5 % X
The Articles of Organization for this Limited Liability Co	mpany were filed on	10-26-2010	and assigned
Florida document numberL10000111390	<u>-</u> •		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company be	re•	
22 It amonaing name, enter the new name of the finite	ou maining company ne	<u></u> .	
779	w		(1 1 C)
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Compa	any," the designation	"LLC" or the appreviation
_			
Enter new principal offices address, if applicable:	 		<u> </u>
(Principal office address MUST BE A STREET ADDRE	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
Muning address MAT BE ATOST OFFICE BOAT			
D. If amonding the unitary desired and and the unitary	1 .00 11	1	4 64
B. If amending the registered agent and/or registered agent and/or the new registered office addresses and the registered office addresses and the registered office addresses and the registered of the registered of the registered agent and/or the new registered of the registered of the registered agent and/or the new registered agent and/or the new registered agent and/or registered agent and/or the new registered agent and/or registered agent ag	rea office address on (ss here:	our records, <u>enter</u>	the name of the new
The state of the s	110101		
N			
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street ad	ldress

	City	, Florida _	Zip Code
	~y		zip couc

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 **Title Address Type of Action** Name 1 **MGRM** Jerry M Clanton II 2173 Hwy 19 N Remove Perry FL 32347 ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 15th 2010 Dated_ Signature of a member or authorized representative of a member Jerry M Clanton II Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00