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SECRETARY OF STATE
SECRETARY OF

B. BOSTICK

MAR - 7 2010

EXAMINER

COVER LETTER

TO: Registration S Division of Co					
SUBJECT: DU	20 Auto S	ales 160			
		ited Liability Company			
	. :				
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	ondence concerning this matte	r to the following:			
	Douglas	Valle			
	1	Name of Person			
		Firm/Company			
	10280 Cr	epe Tusmine C	- n		
	Fort M	Yevs F/ 33 City/State and Zip Code Com To be used for future annual report notification	913		
	VOUASA E-mail address:	2 6 mail. Com to be used for future annual report notifica	tion)	==	
For further information	concerning this matter, please	call:	ļ	SEC ALL	**
Douglas	Valle	at (239) 7384	1848	MAR -	
(Name	of Person	Area Code & Daytime T	elephone Number	ori Mari	in desi 3 Section
			,	ANIO:	
Enclosed is a check for t	the following amount:		Č	ΘΕΑ ΕΕΑ Α	- NICOLO
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$60.00 Filing Factoring Certificate of Securified Copy (additional copy)	Status &)

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 Taliahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Duro Duto So	ulos LLC		
(Name of the Limited Liability (A Florida I	Company as it now appears on our r Limited Liability Company)	records.)	
The Articles of Organization for this Limited Liability C	Company were filed on ////b/	2010 and assigned	
Florida document number 4 100001199 4 4	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ited liability company here:		
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Company," the de	esignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	(ESS)		
		Av	
		MAR T	
Enter new mailing address, if applicable:	- <u></u>	All Control of the Co	
(Mailing address MAY BE A POST OFFICE BOX)		S 1	
		OR ALL	
B. If amending the registered agent and/or regist	tered office address on our record	ds, enter the name of the new	
registered agent and/or the new registered office add	ress here:	Ð	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		Florida	
	City	Z ip 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> **Type of Action** MGRM Rolando P. Juarez Remove ☐ 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.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00