

L110002206007

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : HISPANUSA INC  
Account Number : I20070000099  
Phone : (954)478-2706  
Fax Number : (954)934-0334

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TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
JUST FOUR TIRES, LLC

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A. LUNT  
SEP -8 2011  
EXAMINER

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: JUST FOUR TIRES, 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:

**NORBERTO M. BERLUSCONI**  
Name of Person

**JUST FOUR TIRES, LLC**  
Firm/Company

**4371 N DIXIE HIGHWAY**  
Address

**DEERFIELD BEACH, FL 33064**  
City/State and Zip Code

**HISPANUSA@HOTMAIL.COM**  
E-mail address: (to be used for future annual report notification)

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 REGISTRATION OF STATE  
 TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

**NORBERTO M. BERLUSCONI** at ( **954** ) **839-5410**  
 Name of Person 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JUST FOUR TIRES, 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 09/06/2011 and assigned Florida document number L11000006007.

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)

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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: NORBERTO M. BERLUSCONI

New Registered Office Address: 4371 N DIXIE HIGHWAY

Enter Florida street address

DEERFIELD BEACH, Florida 33064

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.

[Handwritten Signature]

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>
MGR	JOHN P SANTANA	4371 N DIXIE HIGHWAY DEERFIELD BEACH, FL 33064	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	NORBERTO M. BERLUSCONI	2215 CYPRESS ISLAND DR #605 POMPANO BEACH, FL 33060	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input 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)*

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

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 TALLAHASSEE, FLORIDA  
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Dated SEPTEMBER 6, 2011



Signature of a member or authorized representative of a member

NORBERTO M. BERLUSCONI

Typed or printed name of signee