

L11000008454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

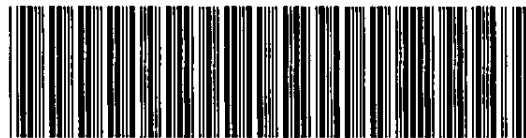
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
OCT 25 2012

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MCLymont Affordable Luxury Auto, 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:

Martindale F. MCLymont
Name of Person

MCLYMONT AFFORDABLE LUXURY AUTO
Firm/Company

4014 W. South Ave Suite A
Address

Tampa, FL 33614
City/State and Zip Code

mclymontluxuryauto@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martindale F. MCLymont at (813) 875-5050
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

FILED
12 OCT 24 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MCLYMONT AFFORDABLE LUXURY AUTO
(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 January 20, 2011 and assigned Florida document number L11006008454

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)

4014 W. South Ave
Tampa, FL 33614

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 273754
Tampa, FL 33688

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:

Maclindale F. McLymont

New Registered Office Address:

4014 W. South Ave Suite A
Enter Florida street address

Tampa, Florida 33614
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.

Maclindale F. McLymont
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


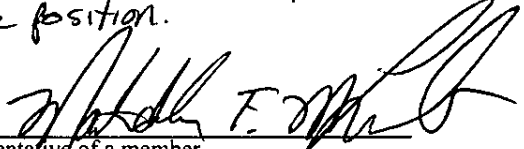
Title	Name	Address	Type of Action
MGR	Kimberly R. Williams	911 Barrie Ave Tallahassee, FL 32303	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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_____	_____	_____	<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.)*

Registered Agent
 Martindale F. McLymont
 10318 Carrollwood Lane #66
 Tampa, FL 33618

* I Martindale McLymont, is familiar with and accepts the obligations of the position.

Dated October 22, 2012:


 Signature of a member or authorized representative of a member
 Edna A. Adjei
 Typed or printed name of signee

 Martindale F. McLymont