# 11000034232

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## **COVER LETTER**

FO:	Registration Sci Division of Coi	ection & ***  porations	e e e	.fs	ear or
SHRIB	ECT:	WorldDrivetr	ainSupply.com LLC		
. • ( ) [ 111 ]			ted Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
			Bradley H. Gilders		
			Name of Person	We the second se	
		* 17. N. Salah Salah	Virm/Company	and the second s	
			1724 Acme Street		
			Address		
			Orlando, FL 32805		
		•	City/State and Zip Code		
		E-mail address: (	adgilders@yahoo.com to be used for finure annual report not	ilication)	
For fur	ther information c	oncerning this matter, please c		,	
		lley H. Gilders	at ( <u>407)</u> Area Code & Daytii	286-0447	
	Name o	f Person	Area Code & Dayti	me Telephone Number	
Enclose	ed is a check for th	ne following amount:			
<b>□</b> \$25.	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60,00 Filing Fee, Certificate of Stat Certified Copy (additional copy is	
		•			

### 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

WorldDri	vetrainSupply.com L	<u>LC</u>	
( <u>Name of the Limited Liab</u> i (A Flori	<mark>ility Company as it now appea</mark> da I imited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabilit		03/21/2011	and assigned
Florida document number L11000034232	•		
This amendment is submitted to amend the following	Ç		
A. If amending name, <u>enter the new name of the l</u>	<u>imited liability company her</u>	<u>·e</u> :	
The new name must be distinguishable and end with the	words "Limited Liability Compa	uny." the designation "I	A.C" or the abbreviation
"LLC"			
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
	A N. V. A DESCRIPTION AND A SECTION AND A SECTION ASSESSMENT ASSES	. anna ara ar a a a a a a a a a a a a a a	were construent to the state of
Enter new mailing address, if applicable:	THE WATER SECTION STREET, SECTION OF THE PROPERTY OF THE PROPE		to his himbling and and physique property as the his his his
(Mailing address MAY BE A POST OFFICE BOX)	Service of the servic		mananan ya mananan ya mananan
	and find from the first of the	***************************************	as a se session surface of adolphic section in
B. If amending the registered agent and/or represented agent and/or the new registered office a		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:		a month of 1 tons — 15 days and an analysis of the state	and the second s
New Registered Office Address:			
	En	ter Florida street add	ress
	City	. Florida	
M-TOPL-ANGENCE CO.	City		Zin Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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, <u>enter the title, name, and address of each Manager</u> or <u>Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Type of Action Title Address Name Paul E. Flaherty **MGRM** 602 Coral Way Add
Winter Springs, FL 32728 7 Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Famember or authorized reprocentative of a member Bradley H. Gilders Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00