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AND SEEF FLORID

K. SALY EXAMINER MAY 4 2011

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJI	Name of Limited Liability Company
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Essar F. Garci'a  Name of Person
	Solari Auto Mall Firm/Company
	260 N.W. 79thst
	City/State and Zip Code  Solari Auto Mall ayahoo. com  E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	Name of Person at (305) 967-2226  Area Code & Daytime Telephone Number
Enclose	ed is a check for the following amount:
<b>▼</b> \$25	.00 Filing Fee \$\ \text{Certificate of Status} \text{\$\subseteq}\$\$\\$55.00 Filing Fee & \text{\$\subseteq}\$\$\\$60.00 Filing Fee, \text{\$\centercolor Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\centercolor Certified Copy (additional copy is enclosed)} \$\centercolor Cert

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**

		• 51	7/1 3:26
JOLARI AUT	O MALL LL	2 <u>PAL</u>	LANGE CONSTANT
SOLARI AUT (Name of the Limited Liabi (A Florid	lity Company as it now la Limited Liability Com	appears on our records.)	FLORIDA -
		4 .	• •
The Articles of Organization for this Limited Liability	Company were filed of	on <u>04/14/2011</u>	and assigned
Florida document number	·		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the li	mited liability compa	ny here:	
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability	Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)	<u></u>	
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac		s on our records, <u>ente</u>	er the name of the new
Name of New Registered Agent:	Gaid	ia , Essar F.	
New Registered Office Address:	260	N.W. 79th st	
		Enter Florida street d	
	<u>Miami</u>	, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registe	red 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	Garcia, Esser F	260 N.W. 79 H st Miami Fl. 33150	Add Remove
<u>PR</u>	Garcia, Mauricin	260 N.W. 79th st Miami F1. 33150	Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
<del></del>			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary	
_			
  Dated	April 26, 2	A//	
	Cle	per or authorized representative of a member	
		r F Garcia ed or printed name of signee	<u>.</u>

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Filing Fee: \$25.00