L11000046541

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

From:
Account Name : J.KEVIN DRAKE,P.A.
Account Number : I20020000002
Phone : (941)954-7750
Fax Number : (941)951-1509

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: richard@richarddevita.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**
**DEVITA IMAGING, L.L.C.**

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EXAMINER

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# COVER LETTER

**TO:** **Registration Section**
**Division of Corporations**

**SUBJECT:** DEVITA IMAGING, L.L.C.
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:

J. KEVIN DRAKE, ESQ.
Name of Person

J. KEVIN DRAKE, P.A.
Firm/Company

1432 FIRST STREET
Address

SARASOTA, FLORIDA 34236
City/State and Zip Code

RICHARD@RICHARDDEVITA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

J. KEVIN DRAKE, ESQ. at ( 941 ) 954-7750 X 412
Name of Person Area Code & Daytime Telephone Number

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*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

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DEVITA IMAGING, L.L.C.
(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 APRIL 19, 2011 and assigned Florida document number L11000046541.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

DEVITA MOTORS, L.L.C.

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: _____

New Registered Office Address: _____
*Enter Florida street address*

_____, Florida _____
*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.*

_____
*If Changing Registered Agent, Signature of New Registered Agent*

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**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 |
|---|---|---|---|
| MGRM | COLLEEN DEVITA | 3000 S. TAMIAMI TRAIL<br>SARASOTA, FLORIDA 34239 | ☐ Add<br>☑ Remove |
| | | | ☐ Add<br>☐ Remove |
| | | | ☐ Add<br>☐ Remove |
| | | | ☐ Add<br>☐ Remove |
| | | | ☐ Add<br>☐ Remove |
| | | | ☐ Add<br>☐ Remove |

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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Dated OCTOBER 11, 2012

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Signature of a member or authorized representative of a member

RICHARD N. DEVITA, MANAGING MEMBER
Typed or printed name of signee



**Filing Fee: $25.00**