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| (Re | equestor's Name) | | | | |
|---|------------------|-----------|--|--|--|
| (Address) | | | | | |
| (Ad | ldress) | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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SECRETARY OF STATE

D. BRUCE

JUL 18 2011

EXAMINER

COVER LETTER

| TO: | Registration S Division of Co | ection rporations | e e e e e e e e e e e e e e e e e e e | • | | |
|------------------|----------------------------------|--|---|--|-------------|-----|
| SUBJE | СТ: | TG Autos Name of Lim | LLC ited Liability Company | yar - | | |
| | | f Amendment and fee(s) are sul | • | | | |
| | · | Jeff | rey A Brown Jr Name of Person | | | |
| | | 4465 G. | TG Autos LLC Firm/Company ranada d Address | | t | |
| | | | ta, GA 30349 City/State and Zip Code Brown & Tagutos.com to be used for future annual report notification | n) | 11 JUL 15 A | |
| | | concerning this matter, please c | - | | M TOP | |
| · | Jeffrey A C | Prown by Person | at (<u>678</u>) <u>437-8737</u> Area Code & Daytime Tele | | AIDA I | |
| Enclosed | d is a check for t | he following amount: | | | | |
| ▼ \$25.0 | 00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Certificate of Certified Co (additional of | of Status & | ed) |
| MAILING ADDRESS: | | ING ADDRESS: | STREET/COURIER A | ADDRESS: | | |

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability Compar (A Florida Limited L | LLC ny as it now appears on our records.) iability Company) | | | |
|--|--|---------------------------|--|--|
| The Articles of Organization for this Limited Liability Company Florida document number L11000060092. | were filed on | and assigned | | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited liabi | ility company here: | | | |
| The new name must be distinguishable and end with the words "Limit "L.L.C." | ted Liability Company," the designation | "LLC" or the abbreviation | | |
| Enter new principal offices address, if applicable: | 1900 N Orange Blossom | Tal | | |
| (Principal office address MUST BE A STREET ADDRESS) | SteD | | | |
| | Orlando, FL 32804 | HASS | | |
| Enter new mailing address, if applicable: | 1900 N Orange Blossom | THE = IT | | |
| (Mailing address MAY BE A POST OFFICE BOX) | Ste D | CS SECTION | | |
| | Orlando, FL 32804 | RIDA | | |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here | | the name of the new | | |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | | | | |
| Enter Florida street address | | | | |
| | | | | |
| | 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

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> **Type of Action** <u>Name</u> **Address** Jeffrey A Brown L Add 4465 Granada dr Atlanta, GA 30349 MGR Remove ☐ Add Remove ☐ Add Remove Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated July 13 Signature of a member or authorized representative of a member Jeffrey A Brown Jr
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00