

L11000043699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900217656659

01/20/12--01014--009 **30.00

FILED
12 JAN 20 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JAN 23 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1-2-3 Auto Rental 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:

Jorge Gonzalez
Name of Person

1-2-3- Auto Rental
Firm/Company

4019 N W 28 St
Address

Miami, Florida 33142
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Monica Jaramillo at (305) 871 0776
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
12 JAN 20 AM 11:32
CLERK OF STATE
TALLAHASSEE, FLORIDA

1-2-3-Auto Rental LLC

(A Florida Limited Liability Company)

Page 1 of 2

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

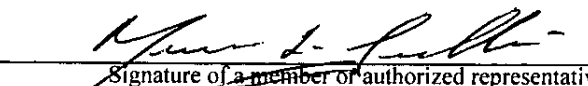
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jorge Luis Gonzalez Ortiz	4019 N W 28 St Miami, Florida 33142	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Jorge Gonzalez	4019 N W 28 St Miami, Florida 33142	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<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.)

Dated 01/17/2012, _____

FILED
 12 JAN 20 AM 11:32
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



 Signature of a member or authorized representative of a member
 Monica L Iacumillo

 Typed or printed name of signee