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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

NOV 23 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ITALIAN DESIGN AUTOMOTIVE GROUP, 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:

SANFORD N. REINHARD

Name of Person

SANFORD N. REINHARD, P.A.

Firm/Company

1290 WESTON ROAD, SUITE 201

Address

WESTON, FL 33326

City/State and Zip Code

SANREIN@BELLSOUTH.NET

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

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For further information concerning this matter, please call:

SANFORD N. REINHARD

Name of Person

at (**954**)

389-8900

Area Code & Daytime Telephone Number

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

ITALIAN DESIGN AUTOMOTIVE GROUP, LLC

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:

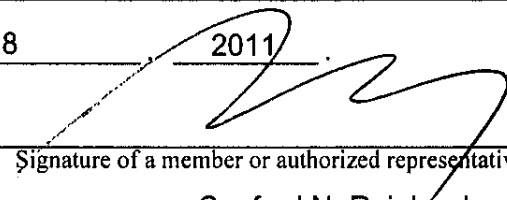
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Fernando Arellano Geddes	1290 Weston Road, Suite 201 Weston, FL 33326	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

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Dated November 18, 2011



Signature of a member or authorized representative of a member
Sanford N. Reinhard

Typed or printed name of signee