# L11000119814

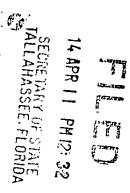
| (Re                     | questor's Name)  | !  |
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| (Ad                     | dress)           | <u>.                                      </u> |
| (Ad                     | dress)           |  |
| (Cit                    | y/State/Zip/Phon | ne #)  |
| PICK-UP                 | ☐ WAIT           | MAIL   |
| (Bu                     | siness Entity Na | me)  |
| (Do                     | cument Number    | )  |
| Certified Copies        | _ Certificate    | s of Status                                    |
| Special Instructions to | Filing Officer:  |  |
|                         |                  |  |
|                         |                  |  |
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Office Use Only

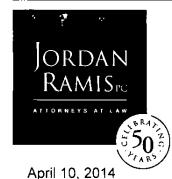


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J. Shivers APR 1 4 2014



Lake Oswego

Two Centerpointe Dr., 6th Floor Lake Oswego, OR 97035 503-598-7070

www.jordanramis.com

Vancouver

1499 SE Tech Center Pl., #380 Vancouver, WA 98683 360-567-3900 Bend

360 SW Bond St., Suite 400 Bend, OR 97702 541-647-2979

VIA FEDERAL EXPRESS

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

Re:

**Articles of Amendment** 

Mercedes/OBT Brown Buy-Out Our File No. 51970-71858

To Whom It May Concern:

Enclosed please find Articles of Amendment to Articles of Organization for the following eight entities. We have also enclosed our check in the amount of \$200 in payment of the filing fee (\$25 per entity).

- 1. Boyland Auto Center, LLC -- document number L11000119814.
- 2. Boyland and Brown Auto Detail OBT, LLC document number L12000068510.
- 3. Boyland and Brown Auto OBT, LLC document number L12000068435.
- 4. Boyland and Brown Pre-owned OBT, LLC -- document number L12000068507.
- 5. Boyland and Brown Properties OBT, LLC document number L12000045334.
- Boyland and Brown Properties, LLC document number L02000027231.
- 7. Bumperdoc OBT, LLC document number L12000043647.

- EIMS

8. M/M Auto Care Center, LLC – document number L11000124926.

Thank you for your assistance.

Sincerely,

JORDAN RAMIS PC

Krista Evans Admitted in Oregon krista.evans@jordanramis.com OR Direct Dial (503) 598-5575

## **COVER LETTER**

| TO:     |          | stration Sect<br>sion of Corpo                |  |   |                                       |   |
|---------|----------|---|--|---|---------------------------------------|---|
| SUBJI   | 3 com    | Boylar  | nd Auto Center,                              | LLC   |                                       |   |
| SUBJI   | sci: _   | <u>,                                     </u> | Name of Limited I                            |   | ,                                     |   |
|         |          |   |  |   |                                       |   |
| The en  | closed   | Articles of A                                 | nendment and fee(s) are submitte             | d for filing.   |                                       |   |
| Please  | return a | ıll correspond                                | lence concerning this matter to th           | e following:  |                                       |   |
|         |          |   | Krista Evans                                 |   |                                       |   |
|         |          |   |  | Name of Person  |                                       | <del></del>   |
|         |          |   | Jordan Ramis                                 | PC  |                                       |   |
|         |          |   |  | Firm/Company  | · · · · · · · · · · · · · · · · · · · |   |
|         |          |   | 2 Centerpointe                               | Drive,  | 6th Floor                             |   |
|         |          |   |  | Address   |                                       |   |
|         |          |   | Lake Oswego,                                 | OR 97   | 035                                   |   |
|         |          |   |  | sy/State and Zip C                                      |                                       |   |
|         |          |   | krista.evans@jordanram                       |   | cht@krachtlawfi                       |   |
| For fur | ther inf | ormation con                                  | cerning this matter, please call:            | used for future and                                     | nual report notification              | ,   |
|         |          | Evans   | -  | <sub>at</sub> 503                                       | 598-557                               | 5   |
|         |          | Name of P                                     | erson  | Area Code   | Daytime Telepl                        | none Number   |
| Enclos  | ed is a  | check for the                                 | following amount:                            |   |                                       |   |
| ■ \$2:  | 5.00 Fil | ing Fee                                       | □ \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing F<br>Certified Cop<br>(additional copy i | y                                     | \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Boyland Auto Center, LLC (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 October 19, 2011 and assigned Florida document number L11000119814 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) 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

#### 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member Title <u>Name</u> **Address Type of Action** Dorian S. Boyland 4301 Millenia Blvd **MGRM** □ Add Orlando, FL 32839 ■ Remove Michael L. Brown 4301 Millenia Blvd **MGRM** □ Add Orlando, FL 32839 **■** Remove 4301 Millenia Blvd MGR Boyland Auto OBT, LLC **■** Add Orlando, FL 32839 ☐ Remove □ Remove ☐ Remove

| -                          |   |                        |          |                   |                          |
|----------------------------|---|------------------------|----------|-------------------|--------------------------|
|                            |   |                        |          |                   |                          |
| <del></del> -              |   |                        |          |                   |                          |
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|                            |   |                        |          |                   |                          |
|                            |   | • "                    |          |                   |                          |
|                            |   |                        |          |                   | <br>                     |
| <br>Effective              | date, if other than the   | date of filing:        |          | -                 | <br>(ontional)           |
| The effecti                | date, if other than the   | of be prior to date of |          | d date and dannor | (optional)<br>days after |
| The effecti                |   | of be prior to date of |          | d date and dannor |                          |
| The effecti<br>the date th | ve date must be specific, cann                                      | of be prior to date of |          | d date and dannot |                          |
| The effecti<br>the date th | we date must be specific, cannot<br>is document is filed by the Flo | of be prior to date of | State)   | .(_)              |                          |
| The effecti                | we date must be specific, cannot<br>is document is filed by the Flo | of be prior to date of | State)   | d date and dannot |                          |

Page 3 of 3

Filing Fee: \$25.00

