

41000132922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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05/07/14 11:11:11

B. BOSTICK
MAY 14 2014

EXAMINER

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Service Plus AutoMechanic Repair 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 Nov 23, 2011 and assigned Florida document number L11000132922.

This amendment is submitted to amend the following:

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

Auto Station USA, Service + Auto Repair "LLC."

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)

1140 NW 132 Street
North Miami, FL 33168

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:

Manfred Antoine

New Registered Office Address:

1140 NW 132 Street

Enter Florida street address

North Miami

City

Florida

FL 33168

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 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

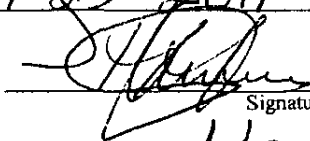
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>President</u>	<u>Manfred Antoine</u>	<u>1140 NW 132 St NM, FL 33169</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		<u>431 SW 10 Ter</u>	
<u>V/P</u>	<u>Charly Obas</u>	<u>Hallandale, FL 33009</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		<u>13782 barberry Dr</u>	
<u>SC</u>	<u>Joseph Valentin</u>	<u>Wellington, FL 33414</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 11-23-2011, _____



Signature of a member or authorized representative of a member

Manfred Antoine

Typed or printed name of signee

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