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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

# MR ELITE MOTORS, 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:

**INNA VORONA** 

Name of Person

CORONA TAX SERVICES INC.

Firm/Company

3363 NE 163RD STREET STE 506

Address

N. MIAMI BEACH, FL 33160

City/State and Zip Code

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

For further information concerning this matter, please call:

**INNA VORONA** 

<sub>at (</sub>954<sub>)</sub>646-2777

Name of Person

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### MR ELITE MOTORS, 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 Florida document number L11000140105	y were filed on 12/13/2011	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lial	bility company here:			
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Company," the designation "I	LLC" or the abbreviation		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
		7- (-) (-2)		
		T- i fan:		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		Fig		
Manney address MATT BEATT OST OFFICE DOXY		77 DY (***)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, <u>enter t</u> re:	the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street ada	lress		
	, Florida			
<del></del>	, Fiorida	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 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 Address <u>Title</u> <u>Name</u> **Type of Action** 3703 NW 82ND AVE **MGR** PEREPELKINA, VALENTINA CORAL SPRINGS, FL 33065 Remove

D. If	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	i
	Romu Perfects  Signature of a member or authorized representative of a member  Roman Perebelkin  Typed or printed name of signee
	Signature of a member or authorized representative of a member  Roman Perehelkin
	Typed or printed name of signee

Page 3 of 3

2813 JUNE 24 PM 3: 25