Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000280229 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SMALL BUSINESS RESOURCES USA,

Account Number: I20040000173 : (407)298-4646 Phone

Fax Number : (407)297-0588

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **DRIVER 2000 LLC**

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 0 |
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FAX AUOT # H13000 280229 3

TO:

Registration Section Division of Corporations

Driver 2000 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:

James K. Duerr, CPA

Small Business Resources USA, Inc.

Firm/Company

1601 Park Center Dr. Ste. 6A

Orlando, FL 32835

City/State and Zip Code

JimD@sbrorlando.com

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

For further information concerning this matter, please call:

James K. Duerr, CPA

Name of Person

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

FAX AUDIT # H13000 280 229 3

Driver 2000 LLC

FPX AUDIT # H /3 000 280 29 3 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited (A | Liability Company Florida Limited Lie | as it now appears on our records.) bility Company) | | • | |
|---|--|---|------------------------------|-------------------|---------------------------------------|
| The Articles of Organization for this Limited Li | iability Company w | ere filed on January 3, 2012 | and | assigned | i |
| Florida document number L12000001036 | · | | | | |
| | | | | | |
| This amendment is submitted to amend the following | owing: | | ابي منتر | 12 | |
| A. If amending name, enter the new name of | <u> the limited liabili</u> | ty company here: | | []] | · · · · · · · · · · · · · · · · · · · |
| Michael D. Guidice, LLC | | | | 8 | داد الاستوار داد الاستوار |
| The new name must be distinguishable and end wit | h the words "Limited | Liability Company," the designation | "LLC" or th | 10Cabbrev | /iation |
| "L.L.C." | | | | Ē | 1 8 |
| Enter new principal offices address, if applies | able: | | !: | _ | · |
| (Principal office address MUST BE A STREE | T ADDRESS) | | | بَب | |
| • | | | | <u>ယ</u> ——— | |
| | | | | | |
| Enter new mailing address, if applicable: | | | | | |
| (Mailing address MAY BE A POST OFFICE) | BOX) | | | | |
| | | | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered of | | e address on our records, <u>enter</u> | the name | of the | <u>new</u> |
| Name of New Registered Agent: | Small Busine | ss Resources USA, Inc. | | | |
| New Registered Office Address: | 1601 Park Center Dr., Ste. 6A | | | | |
| ATEN HARMAN OF CHIEF AND AND A | | Enter Florida street ac | idress | | |
| | Orlando | , Florida | 32835 | | |
| | | City | Zip Co | de | _ |
| New Registered Agent's Signature, if changing R | legistered Agent: | | | | |
| I hereby accept the appointment as registered the provisions of all statutes relative to the pr accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this c | roper and complet stered agent as pro registered office pa | e performance of my duties, and I ovided for in Chapter-608, F.S. Or | l am famili r, if this do | ar with cument | and |

FAX AUDIT # H 130002802293

MGR = Manager

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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:

MGRM = Managing Member <u>Address</u> Type of Action <u>Title</u> Name 8297 Championsgate Blvd. Michael D. Guidice MGRM Suite 409 Remove Championsgate, FL 33896 Michael D. Guidice 7059 Pasturelands Place MGR Winter Garden, FL 34787 Remove

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| D. If ar | nending any other information, enter change(s) here: (Attach additional sheets, if necessar) | <i>(</i> .) | | |
|----------|--|-------------------------|--------|------------------|
| | ARTICLE TIL: THE PURPOSE OF THE COMITTY CARRIED | 7_ | | |
| | COMPANY IS BEING AMBURED TO ? | | | |
| | LICENSED REAL ESTATE ACTUATY AND ANY OTHER | | | |
| | RECOTED ACTIVITY | | | |
| Dated _ | 12/20/13 Marth 2 D. 92 him | | | |
| | Signature of a member or authorized representative of a member | 3 × (2) | | |
| | mben | <u> </u> | دمه | ***** |
| | Typed or printed name of signer | | Tri | - ∔ ‡ |
| | Page 3 of 3 | الحرز أرا العرز أرار | 23 | , |
| | Filing Fee: \$25.00 | ROLL TEN | 图 84 2 | T _d |