

L120000010043

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

AUG 13 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLUE SKY 2012
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:

Deborah Troup

Name of Person

Firm/Company

604 Sea View Circle

Address

Destin, Florida

City/State and Zip Code

mrktrp@msn.com

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

For further information concerning this matter, please call:

Deborah Troup

Name of Person

at (850)

665-5568

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**

BLUE SKY 2012

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on January 23-2012 and assigned
Florida document number L12000010043.

This amendment is submitted to amend the following:

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

Elite Auto of Florida 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:

3086 North Highway 393

(Principal office address MUST BE A STREET ADDRESS)

Santa Rosa Beach, Florida, 32459

Enter new mailing address, if applicable:

981 Hwy 98 E.#3249

(Mailing address MAY BE A POST OFFICE BOX)

Destin, Florida, 32541

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:

Same

New Registered Office Address:

3086 No. Hwy, 393

Enter Florida street address

Santa Rosa Beach

, Florida

32459

City

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 Changing Registered Agent, Signature of New Registered Agent

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	James R. Barth	2030 Willowood Drive North Ontario, Ohio 44906	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

NA

Dated August 9, 2012

Deborah Troup

Signature of a member or authorized representative of a member

Deborah Mae Troup
Typed or printed name of signee

8-9-12

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12 AUG 10 PM 3:06
TALLAHASSEE, FLORIDA