# 120000544

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## **COVER LETTER**

Division of Cor			
SUBJECT:	TAS ME	otors LLC	
	Name of Limit	ed Liability Company	•••
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Reginale	M Benthiaux	n e
	TAS	Motors LLC	
		Firm/Company	<u> </u>
	7/28	EAST Colonial E	).ve
		Address	
	ORLAND	City/State and Zip Code	7
		PAY dans o . Com	
For further information co	oncerning this matter, please ca	all:	
Rog naid M	Derth. Aume	at ( <u>497)</u> 718- 88 Area Code & Daytime To	elephone Number
Enclosed is a check for the	ne 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

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L12000015214</u> .	were filed on $2/1/2012$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and end with the words "Lim"	ited Liability Company," the designation "LLC" or the abbreviation
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 o registered agent and/or the new registered office address he	
Name of New Registered Agent:	12 NOV
New Registered Office Address:	Enter Florida street addresse  , Florida  City  SZip Code  5
	City Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>.</u> 프린 <b>#2</b>

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, <u>enter the title, name, and address of each Manager or Managing-Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGR</u> M	Edward J BAitA	7128 E Colonial Drive ORlando FL 32807	Add
			Remove
			Add
			Remove
	·		Add
			Remove
			_
			Add
			Remove
			Add
			Remove
			Add
			Remove

amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
	10/27/, 2011.
	Reginald M Tenthiaume
	Keginaid M Benthiaume
	Typed or printed name of signee

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Filing Fee: \$25.00