## L12000035382

(Re	equestor's Name)			
(Address)				
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



500234735775

05/09/12--01014--018 \*\*25.00

2012 MAY -9 PH 12: 58
SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN
MAY 1 0 2012
EXAMINER

### **COVER LETTER**

TO: Registratio Division of	n Section Corporations		
SUBJECT:	DAULA AUTOMOT	IVE ENTERPRISES, LLO	
	Name of Limi	ited Liability Company	
	s of Amendment and fee(s) are sul	_	
		Alan Daula	
Name of Person		Name of Person	
	Daula A	Daula Automotive Enterprises, LLC	
	<del>- ,</del>	Firm/Company	
		800 NW 1st Ave.	2012' TAL
		Address	<b>一</b>
		oca Raton, FL 33432	2012 HAY -9 PM 12: 58 SECRETARY OF STATE TALLAHASSEE. FLORIDA
		City/State and Zip Code	Eg 3
	E-mail address: (	aautoworks@gmail.com to be used for future annual report notificat	(m) 75.
For further information	on concerning this matter, please of		70 No. 10
	Alan Daula	at ( 561 ) 30	2-4187
Nar	ne of Person	Area Code & Daytime To	elephone Number
Enclosed is a check f	or 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)
	AILING ADDRESS: gistration Section	STREET/COURIER Registration Section	ADDRESS:

**Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# DAULA AUTOMOTIVE ENTERPRISES, 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 \_\_\_\_\_\_ March 13, 2012 \_\_\_\_\_ and assigned Florida document number \_\_\_\_\_\_ L12000035382 \_\_\_\_. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:

This amendment is submitted to amend the following:	SECTION AND AND AND AND AND AND AND AND AND AN	
A. If amending name, enter the new name of the limited liab	ility company here:	LA PARTIE DE LA PA
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the design	nation "LLC" or the abbraciation
Enter new principal offices address, if applicable:	800 NW 1st Ave.	70.27.00
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton, FL 33432	<b>F</b>
Enter new mailing address, if applicable:	800 NW 1st Ave.	
(Mailing address MAY BE A POST OFFICE BOX)	Boca Raton, FL 33432	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address:		enter the name of the new
Megistered Office Address.	Enter Florida str	reet address
	, Flor	
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	nager Aanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Pamoro
			Add Enove
			Add 9 Remove
<del></del>			Agd So Reprove
			remain to
	,		<del>=</del> n
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets	, if necessary.)
Dated	May 7 Signature of a fi	2012  Lan Dayla  ember or authorized representative of a member of authorized representative of a member of a memb	Der .
	-	Alan Daula  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00