L12000036248

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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14 JAN -8 AHII: 59

SECRETARY OF STATE

JAN 1 5 2014

T. BROWN

COVER LETTER

TO:

Registration Section - P. Division of Corporations

Southern Shores Auto Sales, L.L.C.

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:

Raymond G. Flores CPA

Name of Person

Flores Flores & Garg PA

Firm/Company

25 W. Cedar Street Suite 400

Address

Pensacola, FL 32502

City/State and Zip Code

rrw5150@yahoo.com

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

For further information concerning this matter, please call:

Ray Flores CPA

850 **791-666**6

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**



, *		
ARTICLES	OF AMENDMENT	
,	TO	5. P.
ARTICLES	OF ORGANIZATION	I FOR STATE
MITCHES	OF	BECON THE SOUTH
	Or	ASIA ANY
Southern Shores Auto Sales ↓	1.6	1988 Oc. 11.50
		our records)
(<u>Name of the Limited Liability (</u> (A Florida Li	mited Liability Company)	Our records.)
m	03/1 <i>4</i>	7
The Articles of Organization for this Limited Liability Co	impany were filed on 00/14/	and assigned
Florida document number L12000036248	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and end with the word	s "Limited Liability Company,"	the designation "LLC" or the abbreviation
"L.L.C."		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	FCC)	
12 THE PART OFFICE WANTESS TAROUT BE TOTALDET THE PART OF THE PART	<u> </u>	·
Enter new mailing address, if applicable:	-	
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registe	ered office address on our	records, enter the name of the nev
registered agent and/or the new registered office addre		
Name of New Registered Agent:		
New Registered Office Address:	r r	Start Land at Land
	Enter F	lorida street address
		, Florida
	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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Nathan Mansfield	1514 Stanford Rd	Add
		Gulf Breeze, FL 32563	Remove
			
			Add
			Remove
			Remove
			_
			L Add
			Remove
			— Add
			Remove
		· · · · · · · · · · · · · · · · · · ·	Add
			Remove

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
,	11/1 2013
ed	
	7-72
	Signature of a member or authorized representative of a member
	Randy R. Wilson, Managing Member
	Typed or printed name of signee
	Page 3 of 3

Page 3 of 3

Filing Fee: \$25.00