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SECRETARY OF STATE DIVISION OF CORPORATIONS

MAR 1 1 2013

T. HAMPTON

COVER LETTER

TO: Registration Sec Division of Corp		,	
SUBJECT:	PACIE'S Name of Limit	Auto group L ed Liability Company	<u>/c</u>
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	DAVID	WySONG Name of Person	
	GrACIES	Auto Froup L	<u> </u>
		TANGETINE AU	
	Gulfh	Srf FL 33 City/State and Zip Code Self Hampa bay . rr. 1 ode used for future annual report notificati	707
	E-mail address: (to	S & LAMPA bAy . Tr. (CO M
For further information co	oncerning this matter, please ca	all:	
DAULO M. Name of	Person	at (<u>727)</u> 415-82 Area Code & Daytime Te	126 lephone Number
Enclosed is a check for the	e 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

iability Compant as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ____ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (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 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: New Registered Office Address: Enter Florida street address

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.

Citv

If Changing Registered Agent, Signature of New Registered Agent

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** Name Address **Type of Action** DAUTO WYSCH Remove Remove Add Remove Remove

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

lf amendir	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	Charging Oscil, wysong From
	1 registered Agent to A MANAGING MEMBE
	
	
ed	EC-18 2012.
	Jan July
_	Signature of a member or authorized representative of a member
	DAUID WYSONS
	Typed or printed name of signee
	Dags 2 of 2

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Filing Fee: \$25.00

SECRETARY OF STATE SECRETARY OF CORPORATIONS
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