

L 12000067117

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TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Golf Carts of Vero Beach, LLC  
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:

ANNA BURKLEW  
Name of Person

GOLF CARTS OF VERO BEACH, LLC  
Firm/Company

3215 AVIATION BLVD.  
Address

VERO BEACH, FL 32960  
City/State and Zip Code

GOLFCARTS VR@ATT.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANNA BURKLEW at (772) 778-2278  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Golf Carts of Vero Beach, 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 May 18 2012 and assigned

Florida document number L12000067117

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."

X Enter new principal offices address, if applicable:  
(Principal office address **MUST BE A STREET ADDRESS**)

3215 Aviation Blvd  
Vero Beach, FL 32960

X Enter new mailing address, if applicable:  
(Mailing address **MAY BE A POST OFFICE BOX**)

3215 Aviation Blvd  
Vero Beach, FL 32960

**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:

ANNA BURKLEW

New Registered Office Address:

3215 Aviation Blvd, Vero Beach, FL 32960  
Enter Florida street address

Vero Beach, Florida 32960  
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.

Anna B. Burklew  
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>
MGRM	BRIAN J. BURKLEW	3222 Aviation Blvd	<input type="checkbox"/> Add
		VERO Beach, FL 32960	<input checked="" type="checkbox"/> Remove
MGRM	TIMOTHY BURKLEW	3215 Aviation Blvd	<input checked="" type="checkbox"/> Add
		VERO Beach, FL 32960	<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

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

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Dated 1-29, 2013.



Signature of a member or authorized representative of a member

Brian J Buehler

Typed or printed name of signee

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Filing Fee: \$25.00

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