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SECRETARY OF STATE TALLAHASSEE, FLORIDA

AND THE PROPERTY OF THE PROPER

COVER LETTER

TO: Registration Division of C	Section Corporations		
SUBJECT:	Boyland and E	rown Auto OBT, LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
•		Brian M. Kracht	
		Name of Person	
٠.		Kracht Law Firm, PA	TALLAHASSEE, FLORIDE
		Firm/Company	707
•		218 Palmetto Avenue	Prince of the second
		Address	64.0
	C	rlando, Florida 32801	Alle Alle
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifica	ation)
For further information	on concerning this matter, please of	all:	
·	Brian M. Kracht	at (407) 2	44-5522
	ne of Person	Area Code & Daytime	
*•			
Enclosed is a check for	or the following amount:		
\$25.00 Filing Fee		\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
M <i>A</i>	AILING ADDRESS:	STREET/COURIE	R ADDRESS:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Boyland	d and Brown Auto OBT,	LLC	A CONTRACTOR OF THE PARTY OF TH	
(Name of the Limited	Liability Company as it now appear Florida Limited Liability Company)	rs on our records.) 🟒	Electron Con Contraction	
(//	Tionaa Emmea Blaomky Company)		() () () () () () () () () ()	
The Articles of Organization for this Limited Lia	ability Company were filed on	05/22/2012	and assigned	
Florida document number L12000068	435 .		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			755	
This amendment is submitted to amend the follo	wing:		NON THE WAY	
A. If amending name, enter the new name of	the limited liability company be	re:		
,	yno initiou habine, company ne	<u> </u>		
The new name must be distinguishable and end with	a the words "I imited I ishilis Comm	any 2 the decimation wi	I C" on the obbreviation	
"L.L.C."	i the words. Limited Liability Compa	any, the designation if	LC of the appreviation	
V				
Enter new principal offices address, if applica				
(Principal office address MUST BE A STREE)	<u> </u>			
· .				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE I				
Manuel auditos MATI DE ATTOST OFFICE E				
•		<u>-</u>		
B. If amending the registered agent and/o				
B. If amending the registered agent and/o registered agent and/or the new registered off	r registerea office address on . fice address here:	our records, <u>enter t</u>	ne name of the new	
and the man training of the man and the ma	nee and ess nere.			
	Manahal au Sium DA			
Name of New Registered Agent:	Kracht Law Firm, PA			
New Registered Office Address:	218 Palmetto Avenue			
	Enter Florida street address			
	Orlando	, Florida	32801	
	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

1 1 m

<u>Title</u>	Name	Address	Type of Action
vp	Hayden P. Ridore	208 East Colonial Drive Orlando, Florida 32839	Add ✓ Remove
			Add Remove
D. If amendi	ng any other information, enter change((s) here: (Attach additional sheets, if necessary.)	
<u> </u>			_
			_
 Dated	Oct. 16 , 2012		
	.b.	n. KAH	
y .	Signature of a member of	or authorized representative of a member	
-		M. Kracht, Esq.	
	i ypea o	i princed name of signee	

Page 2 of 2

Filing Fee: \$25.00