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Office Use Only

G. MCLEOD

OCT 23 2012

EXAMINER



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COVER LETTER

. TO:

TO:	Registration S Division of Co		, i *	, .
SUBJ	•;' ЕСТ:	Boyland and Broy	vn Pre-owned OBT, LL	_C
3020			ted Liability Company	
The er	nclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
			·	
			Name of Person	
			Kracht Law Firm, PA	
			Firm/Company	
218 Palmetto Avenue				
			Address	,
•		C	Prlando, Florida 32801	
			City/State and Zip Code	
	•	F-mail address:	to be used for future annual report not	ification)
For fu	rther information	concerning this matter, please of	•	incation)
		ian M. Kracht	at (407)	244-5522
	Name	of Person	Area Code & Daytii	me Telephone Number
Enclos	sed is a check for	the following amount:		
 ▼ \$2	5.00 Filing Fee	\$30.00 Filing Fee & : Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
y .	Regis Divis P.O. 1	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Boyland a	and Brown Pre-owned Of	BT, LLC	
(<u>Name of the Limited</u> (A	Liability Company as it now appea A Florida Limited Liability Company)	<u>rs on our records.</u>)	
The Articles of Organization for this Limited L	iability Company were filed on	05/22/2012	and assigned
Florida document numberL1200006	8507		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applic	able:		<u> </u>
(Principal office address MUST BE A STREE	ET ADDRESS)		<u> </u>
·			TAS TO
· · · · · · · · · · · · · · · · · · ·			SE N
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE		S S C	
			D _A
B. If amending the registered agent and/ registered agent and/or the new registered o	or registered office address on ffice address here:	our records, <u>enter tl</u>	ne name of the new
Name of New Registered Agent:	Kracht Law Firm, PA		
New Registered Office Address:	218 Palmetto Avenue		
<u>-</u>	nter Florida street addr	ress	
:	Orlando	, Florida	32801
	City		Zip Code
Now Desiremed Assess Classes and Co.			

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, 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>	Address	Type of Action
. <u>vp</u>	Hayden P. Ridore	208 East Colonial Drive Orlando, Florida 32839	Add ☑ Remove
-			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	_
			
			_ _
Dated	October 16 , 201	2. M. 61+	
·	Brian	or authorized representative of a member n M. Kracht, Esq. or printed name of signee	

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Filing Fee: \$25.00