

L12 0000 68510

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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14 APR 11 PM 12:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers APR 14 2014



Lake Oswego  
Two Centerpointe Dr., 6th Floor  
Lake Oswego, OR 97035  
503-598-7070  
www.jordanramis.com

Vancouver  
1499 SE Tech Center Pl., #380  
Vancouver, WA 98683  
360-567-3900

Bend  
360 SW Bond St., Suite 400  
Bend, OR 97702  
541-647-2979

VIA FEDERAL EXPRESS

April 10, 2014

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

Re: **Articles of Amendment**  
*Mercedes/OBT Brown Buy-Out*  
Our File No. 51970-71858

To Whom It May Concern:

Enclosed please find Articles of Amendment to Articles of Organization for the following eight entities. We have also enclosed our check in the amount of \$200 in payment of the filing fee (\$25 per entity).

1. Boyland Auto Center, LLC – document number L11000119814.
2. Boyland and Brown Auto Detail OBT, LLC – document number L12000068510.
3. Boyland and Brown Auto OBT, LLC – document number L12000068435.
4. Boyland and Brown Pre-owned OBT, LLC – document number L12000068507.
5. Boyland and Brown Properties OBT, LLC – document number L12000045334.
6. Boyland and Brown Properties, LLC – document number L02000027231.
7. Bumperdoc OBT, LLC – document number L12000043647.
8. M/M Auto Care Center, LLC – document number L11000124926.

Thank you for your assistance.

Sincerely,

JORDAN RAMIS PC

Krista Evans  
Admitted in Oregon  
krista.evans@jordanramis.com  
OR Direct Dial (503) 598-5575

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Boyland and Brown Auto Detail OBT, 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:

Krista Evans

Name of Person

Jordan Ramis PC

Firm/Company

2 Centerpointe Drive, 6th Floor

Address

Lake Oswego, OR 97035

City/State and Zip Code

krista.evans@jordanramis.com; bkracht@krachtlawfirm.com

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

For further information concerning this matter, please call:

Krista Evans

Name of Person

at ( 503 ) 598-5575

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

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

Boyland and Brown Auto Detail OB, 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 21, 2012 and assigned  
Florida document number L12000068510.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Boyland Auto Detail OB, LLC

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*

*City*

*Florida*

*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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Dorian S. Boyland	4301 Millenia Blvd	<input type="checkbox"/> Add
		Orlando, FL 32839	<input checked="" type="checkbox"/> Remove
MGRM	Michael L. Brown	4301 Millenia Blvd	<input type="checkbox"/> Add
		Orlando, FL 32839	<input checked="" type="checkbox"/> Remove
MGR	Boyland Auto OBT, LLC	4301 Millenia Blvd	<input checked="" type="checkbox"/> Add
		Orlando, FL 32839	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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SECRETARY OF STATE

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

This LLC shall be manager-managed by one or more managers. The initial manager is Boyland Auto OBT, LLC.

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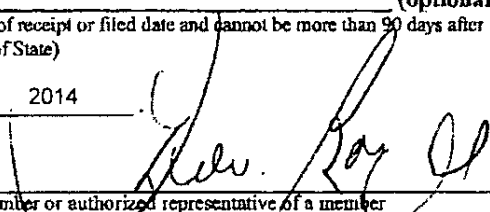
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)*

Dated April 10, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

**Dorian S. Boyland, Manager and Member of Boyland Auto OBT, LLC**

\_\_\_\_\_  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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