

L12 000 135376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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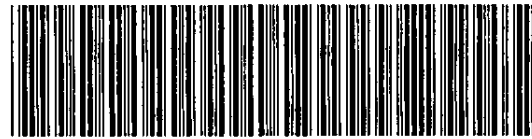
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. Shivers OCT 02 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: International Auto Gallery, 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:

Joshua A. Hernandez

Name of Person

International Auto Gallery, LLC

Firm/Company

6825 Edgewater Dr.

Address

Orlando, FL 32810

City/State and Zip Code

iag2651@gmail.com

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

For further information concerning this matter, please call:

Joshua A. Hernandez

Name of Person

at **(407) 292-6221**

Area Code & Daytime Telephone Number

Enclosed is a check for the 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

13 SEP 25 PM 12:31
TALLAHASSEE, FL
DIVISION OF CORPORATIONS
REGISTRATION SECTION

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

International Auto Gallery, 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 10/23/2012 and assigned
Florida document number L12000135376

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)

6825 Edgewater Dr.
Orlando, FL 32810

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

6825 Edgewater Dr.
Orlando, FL 32810

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:

Joshua A. Hernandez

New Registered Office Address:

6825 Edgewater Dr.

Enter Florida street address

Orlando

City

, Florida 32810

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

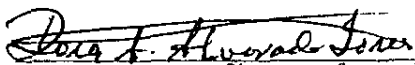
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Joshua A.Hernandez	1516 Mockingbird Lane	<input checked="" type="checkbox"/> Add
		Longwood, FL 32750	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

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

JOSHUA A. HERNANDEZ IS BEING ADDED AS
MANAGER MEMBER

Dated _____



Signature of a member or authorized representative of a member

Dora A. Alvarado Torres

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA