L13000048081

(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



900298803269

05/05/17--01017--026 **25.00

O SIMMONS

COVER LETTER

TO: Registration Secti Division of Corpo	
Premier Auto SUBJECT:	Group LLC
	Name of Limited Liability Company
	•
The enclosed Articles of An	nendment and fee(s) are submitted for filing.
Please return all correspond	ence concerning this matter to the following:
	Vladimir Arutyunov
	Name of Person
	Premier Auto Group LLC
	. Firm/Company
	4845 Belle Terre Pkwy C-14
	Address
	Palm Coast FL 32164
	City/State and Zip Code
	PremierAutoGroupFL@gmail.com
	E-mail address: (to be used for future annual report notification)
For further information cond	cerning this matter, please call:
Vladimir Arutyunov	386 793-3010 at ()
Name of Po	
Enclosed is a check for the f	following amount:
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Premier Auto Group LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 04/01/2013	and assigned
Florida document number L13000048081		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviation "L,L,C."
Enter new principal offices address, if applicable:	1111 N State St	
(Principal office address MUST BE A STREET ADDRESS)	Bunnell FL 32110	•
		mental mental mental mental
Enter new mailing address, if applicable:		para Maria
(Mailing address MAY BE A POST OFFICE BOX)		; U1
		The second secon
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>enter</u> e:	the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	•
	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 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Thomas Sposato	4845 Belle Terre Pkwy C-14	■ Add
		Palm Coast, FL 32164	□ Remove
			☐ Change
		-	Add
		all the second s	Renhove
			☐ Change
			Add =
			□ Remove
·			Change
			□ Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change

	,				
					V-10-
					1574
			· · · · · · · · · · · · · · · · · · ·		
					- 3
·					2 12
-					<u>.</u>
	· · · · · · · · · · · · · · · · · · ·				
					•
Effective date, if other tha	n the date of fil	ing:		(optiona	al)
If an effective date is listed, the da Note: If the date inserted in t document's effective date on	his block does no	t meet the applica	o date of filing or more ble statutory filing r	than 90 days after fili equirements, this da	ng.) Pursuant to 605.0207 ate will not be listed as
ne record specifies a del The 90th day after the			an effective tin	ne, at 12:01 a.n	n. on the earlier of
Dated		2017			
Jacu		111	_•		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00