L13000053462

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SECRETARY OF STATE DIVISION OF CORPORATIONS

MAY 2 2 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporation

Division of Corporations

Sarasota Auto Services, 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:

Mark A. Guthrie

Name of Person

Sarasota Auto Services, LLC

Firm/Company

4502 N. Tamiami Trail

Address

Sarasota, FL 34234

City/State and Zip Code

mgut@aol.com

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

For further information concerning this matter, please call:

Mark A. Guthrie

..941,545-0291

Name of Person

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sarasota Auto Services, LLC		
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears or da Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabilit	y Company were filed on April	2013 and assisted
Florida document number L13000053462		3 HA
This amendment is submitted to amend the following	2:	SECRETARY OF CORP
A. If amending name, enter the new name of the	limited liability company here:	PHIZ: LI
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	ODRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our oddress here:	records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter l	Florida street address
_		, Florida
	Citv	Zin 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>		Type of Action
MGR	Mark A. Guthrie	3129 Donald Ross Rd E	. ✓ Add
		Sarasota, FL 34240	Remove
			-
			_
			_
			Add
			Remove
			. 19 01√88
			SEGRETARE FILE
			PH (
			FATE Add
			Remove
			Add
			Remove

D. If amending any otl	ner information, enter change(s) here: (Attach additional sheets, if necessary.)
_{Dated} May 16	2013
	Dite M. Williamo
Peter N	Signature of a member or authorized representative of a member 1. Williams
<u> </u>	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STAILS
DIVISION OF CORPORATION