L13000134817

(Re	questor's Name)	
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
ANASSEE FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

DANIEL'S AUTOPARTS, 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:

GERI DE BLOIS

Name of Person

Firm/Company

7260 SIENNA RIDGE DR

Address

LAUDERHILL, FL 33319

City/State and Zip Code

geri.db@adeptbookkeepingsvs.com

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

For further information concerning this matter, please call:

Geri De Blois

ૢ⁹⁵⁴્63**2-**6102

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



October 18, 2013

GERI DE BLOIS 7260 SIENNA RIDGE DR LAUDERHILL, FL 33319

SUBJECT: DANIEL'S AUTOPARTS, LLC

Ref. Number: L13000134817

We have received your document for DANIEL'S AUTOPARTS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 513A00024415

Teresa Brown Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TALLAHASSEE OF STATE ORION

DANIEL'S AUTOPARTS, 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 Liabil	ity Company were filed on 09/24/2013	and assigned
Florida document number L13000134817	 .	
This amendment is submitted to amend the following	ig:	
A. If amending name, enter the new name of the	limited liability company here:	
DANIEL'S AUTOPARTS AND REPA	AIR, LLC	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
_	, Flori	
	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 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 = Manag MGRM = Man	er aging Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Add
			Remove
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D. 'If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	
	Signature of a member or authorized representative of a member
	Geri Le Blois
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00