

L14000064974

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(Address)

(Address)

(City/State/Zip/Phone #)

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14 AUG 12 09 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 12 2014
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEW PORT RICHEY NISSAN, 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:

JEANETTE STALUPPI
Name of Person

NEW PORT RICHEY NISSAN, LLC
Firm/Company

133 UP HIGHWAY ONE
Address

N. PALM BEACH, FL 33408
City/State and Zip Code

LUPI@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEANETTE STALUPPI at (561) 844-7148
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

FILED
14 AUG 12 09 11:39
TALLAHASSEE, FL 32301
SECRETARY OF STATE

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

NEW PORT RICHEY NISSAN, 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 4/21/2014 and assigned Florida document number L14000064974

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)

133 US HIGHWAY ONE
N. PALM BEACH, FL 33408

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

133 US HIGHWAY ONE
N. PALM BEACH, FL 33408

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

, 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

By attaching 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

Title	Name	Address	Type of Action
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MANAGING
MEMBER

John STALUTTI

2325 INNOVATION HARBOUR DR ☒ Add

PALM BEACH GARDENS, FL ☐ Remove
33410

MANAGER

JEANETTE M. STALUTTI

2325 INNOVATION HARBOUR DR ☒ Add

PALM BEACH GARDENS, FL ☐ Remove
33410

☐ Add

☐ Remove

14

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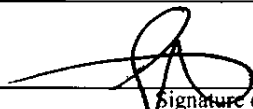
☐ Remove

2. Attaching any other information, such as changes, notes, or other documents, if necessary, to

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 8/11, 2014.



Signature of a member or authorized representative of a member
John Staluppi

Typed or printed name of signee

FILED
14 AUG 12 7:11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA