

LIS 0000 17598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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MAIL

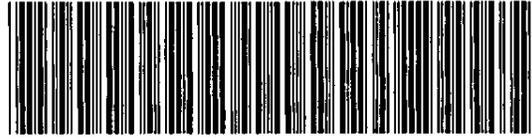
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

J. Silvers MAY 05 2015

**THE LAW OFFICE OF JEFFREY M. JANEIRO, P.L.**

3400 TAMiami TRAIL N., SUITE 203

NAPLES, FLORIDA 34103

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Jeffrey M. Janeiro, J.D., LL.M.

LL.M. in Taxation  
Member FL & PA Bar  
Managing Member

Ronald Klein, J.D. of Counsel \*

Member of FL Bar  
\* Practice Limited to Commercial Litigation

Lauren Canterna, J.D.

Member of FL Bar

Ty Mahaffey, J.D., of Counsel

Member of OH Bar

Daniel Fellhauer, J.D., of Counsel

Member of VA & MI Bar

Articles of Incorporation

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

RE: TAMiami AUTO MART, LLC

To Whom It May Concern:

Enclosed please find Articles of Amendment to Articles of Organization of TAMiami AUTO MART, LLC. a Florida Limited Liability Company, for recording. Also enclosed is a check made payable to your office in the amount of \$30.00.

This Article of Amendment to Organization is to change the following:

Jack T. Klein from Managing Member to Member.

Once the document has been recorded, please return a Certificate of Status and Certified Copy to our office using the enclosed self address and stamped envelope.

Should have any questions please do not hesitate to call our office.

Sincerely,



Lauren C. Canterna, Esq.

Attorney-At-Law

Law Office of Jeffrey M. Janeiro, P.L.

Enclosures

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: TAMIAMI AUTO MART 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:

Jeffrey M. Janeiro, Esq.

Name of Person

Law office of Jeffrey M. Janeiro

Firm/Company

3400 Tamiami Trail N., Ste 203

Address

Naples, FL 34103

City/State and Zip Code

janeiro@jjlawyers.com

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

For further information concerning this matter, please call:

Jeffrey M. Janeiro

239 513-2324  
at ( )

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



If amending 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

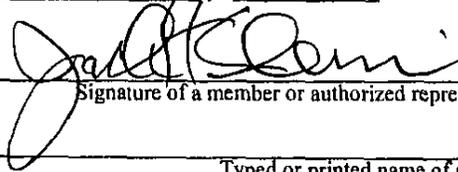
Change title of:

Jack T. Klein from MGR to AMBR

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 \_\_\_\_\_



Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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