

L17000009013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

FEB 14 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Robert E Wayne Auto Sales, 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:

Wayne K. Dozier
Name of Person

Robert E Wayne auto sales, LLC
Firm/Company

6700 NW 17th Ave Suite B
Address

Miami, FL 33142
City/State and Zip Code

We make buying easy@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wayne K. Dozier at (407) 346-0172
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**

Robert E Wayne Auto Sales 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 01/11/2017 and assigned Florida document number L17000009013.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Robert E Wayne Auto Sales, LLC
The new name must be distinguishable and contain 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)

5700 NW 17th Ave Suite B
MIAMI, FL 33142

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1130 Kasim St
OPA-LOCKA, FL 33054

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:

Wayne K Dozier

New Registered Office Address:

1130 Kasim St

Enter Florida street address

OPA-LOCKA

City

Florida

33142

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.

Wayne K Dozier
If Changing Registered Agent, Signature of New Registered Agent

FILED
JAN 13 PM 4:01
CLERK OF STATE
TALLAHASSEE, FLORIDA

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

SECRETARY OF STATE
TAMM HALL
MONTGOMERY, ALABAMA 36102

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Just need to add on my
middle initial

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 02/06, 2017



Signature of a member or authorized representative of a member

Wayne K. Dozier

Typed or printed name of signee

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JUN 17 3 P 4:01
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA