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ALLAHASSEELELIORIO SEUREIARY DE STATE

K. SALY JUN 28 2017

# **COVER LETTER**

TO: Registration Section Division of Corporations										
SUBJECT: De Follo Motor Company 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:										
Jason De Fala										
DeFalco Motor Company LLC Firm/Company										
5791 Plankett St UN. + 6										
Holly Wood F1 33023 City/State and Zip Code										
Defecto Motor Company & Gmail - Com E-mail address: (to be used for future annual report notification)										
For further information concerning this matter, please call:										
Son DeFalce at (518) 858-93)  Name of Person Area Code Daytime Telephone Number										
Enclosed is a check for the following amount:										
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy 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

2017 SUN 23 PM 2:28

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

	 Ciry	Florida
New Registered Office Address:	Enter Florida street ad	dress
Name of New Registered Agent:		

### 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Type of Action** <u>Address</u> <u>Title</u> JN GR JOHN Madden III 9461 Harlan Ct DAdd **M** 10st Minster (0, 80031 - Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Remove ☐ Change  $\square$  Add ☐ Remove ☐ Change ☐ Remove

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(If an e) <u>Note:</u>	tive date, if ot flective date is list If the date inso nent's effective	ed, the date erted in this	must be spec s block doe	ific and cannot be s not meet the a	pplicable statutory	(option or more than 90 days after filing requirements, this	onal) filing.) Pursuant to 605,0207 (3)( s date will not be listed as the
	ecord specifie e 90th day a				t not an effecti	ve time, at 12:01 a	a.m. on the earlier of:
Datec	i			·	·		
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		4	Se	FA/(0			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00