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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Zanata Auto Salls 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:
Mahmud Alwehea Name of Person
Zanata Avto Sals, LLC
27126 Breakers Drive
Wesley Chypel FL 33544 City/State and Zip Code
E-mail address: (to be used for)future annual report notification)
For further information concerning this matter, please call:
Name of Person at (\$13) SHI -0012 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$\Bigcup \text{\$55.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)}\$\$\$\Bigcup \text{\$60.00 Filing Fee, 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

Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our r	records.)
The Articles of Organization for this Limited Liability Company we Florida document number 117000238917.	ere filed on 1120	2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
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)		ACC.
-		AF A
		SS
Enter new mailing address, if applicable:		m _O
(Mailing address MAY BE A POST OFFICE BOX)		C C C C C C C C C C C C C C C C C C C
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: Name of New Registered Agent:	e address on our re	cords, <u>enter the name of the n</u>
New Registered Office Address:	Enter Florida street o	uddress
		_, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe		

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
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AR	Reiad Bughabin	1501 Willow Crest Drive	Add
	·	1501 Willow Crest Drive Richardson, Tx 75081	✓ Remove
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