Division of Corporations

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

: (305)634-3694

Fax Number

: (305)633-9696

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

THE NEW D&J AUTO REPAIR, LLC

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ARTICLES OF AMENDMENTS TO ARTICLES OF ORGANIZATION OF

THE NEW D & JAUTO REPAIR LLC

FIRST: THE ARTICLES OF ORGANIZATION WERE FILED ON 08/15/2006 AND ASSIGNED DOCUMENT NUMBER, L06000080456

SECOND: THE FOLLOWING AMENDMENT(S) TO THE ARTICLES OF ORGANIZATION WAS/WERE ADOPTED BY THE LIMITED LIABILITY COMPANY:

EFFECTIVE APRIL 17^{TH} , 2009 THE NAME HAS BEEN CHANGED TO D & J AUTO REPAIR LLC.

DATED: APRIL 17TH, 2009.

Signature of a member or authorized representative of a member

HERNAN FRANCO
Typed or printed name of signee

H09000094299

ARTICLES OF AMENDMENTS TO ARTICLES OF ORGANIZATION OF

LIMAN BROTHERS LLC

FIRST: THE ARTICLES OF ORGANIZATION WERE FILED ON 03/13/2007 AND ASSIGNED DOCUMENT NUMBER. L09000033808

SECOND: THE FOLLOWING AMENDMENT (S) TO THE ARTICLES OF ORGANIZATION WAS/WERE ADOPTED BY THE LIMITED LIABILITY COMPANY:

EFFECTIVE APRIL 16TH, 2009 AHMED SR ABDALLAH OF 800 NW 2ND AVE MIAMI, FL. 33136 RESIGNS AS MANAGER PARTNER (MGR) AND REGISTERED AGENT OF THIS ORGANIZATION AND OMAR LIMAN IS DESIGNATED AS MANAGER PARTNER (MGR) AND THE NEW REGISTERED AGENT OF THIS ORGANIZATION.

DATED: APRIL 16TH, 2009.

Signature of a member or authorized representative of a member

OMAR LIMAN
Typed or printed name of signee

H09000094299

REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE: The name and the Florida street address of the registered agent are:

OMAR LIMAN (NAME)

800 NW 2ND AVE PLORIDA STREBT ADDRESS (P.O BOX NOT ACCEPTABLE)

MIAML FLA 33136 CITY, STATE, AND ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HERIESY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHERAGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE FROPER AND COMPLETE PERFOMANCE OF MY DUTTES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR IN CHAPTER 60%, FB.

REGISTERED AGENT SIGNATURE

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