L06000109919

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusings Falik News)
(Business Entity Name) LDG-109919
(Document Number)
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COVER LETTER

TO: Registration Secti Division of Corpo		•	
SUBJECT:	Auto Biz, LL Name of Limite	C	
•	Name of Limite	d Liability Company	
The enclosed Articles of Art	nendment and fee(s) are subn	nitted for filing.	
Please return all correspond	ence concerning this matter to	o the following:	
·	Ahmea	Sewel Name of Person	
		Name of Person	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	2200 Forthy	Address - 32807 City/State and Zip Code	
	Orlando, Fl	- 32807 City/State and Zip Code	
	E-mail address: (to	be used for future annual report notificati	on)
For further information con-	cerning this matter, please ca	II:	
Ahmed Jewe Name of P	erson	at (<u>407</u>) 334 – 733 Area Code & Daytime Te	Selephone 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



November 28, 2012

AHMED JEWEL 2200 FORTHYTH ROAD-D30 ORLANDO, FL 32807

SUBJECT: AUTO BIZ LLC Ref. Number: L06000109919

We have received your document for AUTO BIZ LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

en egeneral de la companya de la com

Letter Number: 612A00028307



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2012 DEC 26 AM II: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Auto Biz, L	1,	s rate (prost or	TOTAL CONTRACT
(Name of the Limited Lin	ability Company as it now orida Limited Liability Comp	appears on our records.)	
(A Fit	orida Limited Liability Com	pany)	
The Articles of Organization for this Limited Liabi	lity Company were filed o	n 11/14/06	and assigned
Florida document number Lologoo 1099	<u> 119</u> .		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability compa	ny here:	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability	Company," the designation '	'LLC" or the abbreviation
Enter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
	<u></u> .		
Enter new mailing address, if applicable:		 	
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>		
	·		
B. If amending the registered agent and/or registered agent and/or the new registered office		s on our records, enter	the name of the new
registered agent and/or the new registered office	e aduress nere:		
Name of New Products Advant			
Name of New Registered Agent:			<u></u>
New Registered Office Address:			
		Enter Florida street aa	ldress
-		, Florida	
	City		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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Address Type of Action** Title <u>Name</u> V.P. Rumi Hua 2200 Forthyth RD- D-JO HAdd Orlando, FL 32807 Remove Remove Remove Remove Remove

). If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
	· · · · · · · · · · · · · · · · · · ·
ated	12/18/12
	Marine
	Signature of a member or authorized representative of a member
	Ahmed Jewel
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

2012 DEC 26 MI II: 45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA