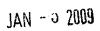
(Red	questor's Name)			
(Add	dress)			
(Add	dress)			
ų iai				
(City/State/Zip/Phone #)				
	—	—		
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Nan	ne)		
•	·	•		
(Da	cument Number)			
(100)	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to I	Eiling Officer:			
Special Instructions to Filing Officer:				
,				
,				

Office Use Only



700139369957

12/31/08--01072--008 **25.00



COVER LETTER

TO:	Registration Se Division of Cor			
SUBJ	_{ЕСТ:} mr. clea	ın auto sales, Ilc.		
		(Name of Lim	ited Liability Company)	
The er	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Rafael Jaquez		
			(Name of Person)	
		mr. clean auto sales, Ilc.	(n: 10	
			(Firm/Company)	
		5415 n. w. 15 st. bay 14		
			(Address)	
		margate, fl. 33063		
			(City/State and Zip Code)	
For fu	rther information c	oncerning this matter, please c	all:	
Rafae	el Jaquez		at (786) 897-3030	
(Name of Person)		of Person)	(Area Code & Daytime To	elephone Number)
Enclos	sed is a check for th	ne following amount:		
\$2.	5.00 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		ation Section on of Corporations ox 6327	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

711.ED 08DEC31 AMII:31

SECRETARY OF STATE TALLAHASSEE FLORIDA

mr. clean 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	y Company were filed on 02/28/2008	and assigned
Florida document number L08000021443		
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Company," the de	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regregistered agent and/or the new registered office a		ds, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	la street address)	
<u> </u>	, 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 Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member **Type of Action** Title **Address** Name MGR Dania Gonzalez 210-174 st. apt. 308 ■ ✓ Add sunny isles beach, fl. 33160 Remove MGR Shaddai Jaquez 210-174 st. apt. 308 ■ Add sunny isles beach, fl. 33160 Remove _____Add Remove _ Add ☐ Add Remove ┌ॅ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 12/29/2008 Signature of a member of authorized representative of a member

Page 2 of 2

Rafael Jaquez

Filing Fee: \$25.00

Typed or printed name of signee