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## **COVER LETTER**

	Registration Se Division of Cor			
CHID IEA		R STOP LLC		
SUBJEC	.1:	Name of Lin	nited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		HAKAN H TOKATLI		
			Name of Person	
		1227 BELFIORE WAY	Firm/Company	
			Address	
		WINDERMERE, FL 3478	6	
		HHTOKATLI@GMAIL.CO	City/State and Zip Code DM	<del></del>
For furthe	er information co	E-mail address: ( oncerning this matter, please or	to be used for future annual report no all:	tification)
HAKAN	H TOKATLI		407 692 5995	
	Name of	f Person		me Telephone Number
Enclosed	is a check for th	e following amount:		
□ \$25.0	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)
	Registra Divisio P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AUTOCAR STOP LLC						
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records.)				
The Articles of Organization for this Limited Liability Company Florida document number	y were filed on	11/12/2009	and assigned			
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited lial	bility company her	<u>re</u> :				
AMERICAN ELITE REAL ESTATE LLC						
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the de	signation "LLC" or the	abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	AMERICAN EL	ITE REAL ESTATE				
Principal office address MUST BE A STREET ADDRESS)	6965 PIAZZA GRANDE AVE SUITE 201					
	ORLANDO, FL.	32835	Pro.			
Enter new mailing address, if applicable:	1227 BELFIORE	WAY	TLAHA.			
Mailing address MAY BE A POST OFFICE BOX)	WINDERMERE.	. FL 34786	-2 958			
<del></del>			iii ≥ in			
B. If amending the registered agent and/or registered of	office address on	our records, ente	The name of the n			
egistered agent and/or the new registered office address her	<u>re</u> :					
Name of New Registered Agent:						
New Registered Office Address: 6965 PIAZZA	GRANDE AVE SU	ITE 201				
	Enter Flori	da street address				
Windermere		Florido :	12835			

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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					A. A.	<u>ယ</u>	
Effective date, if other than the offerive date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot ck does not meet t	he applicable	te of filing or mo statutory filing	re than 90 days af	tional) ter filing.) Pursuan	E to 605.0	0207 I as
ne record specifies a delayed The 90th day after the reco		but not an	effective ti	me, at 12:01	a.m. on the	earlie	r of:
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7/30 Dated	· _						
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Filing Fee: \$25.00