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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H10000071249 3)))



H100000712493ABCY

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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : TODD W. KLISTON, ESQ.
Account Number : 075221000013
Phone : (954) 473-4900
Fax Number : (954) 473-4907

2010 MAR 30 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
10 MAR 30 AM 9:49
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TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AUTO GALLERY OF PALM BEACHES LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

A. LUNT
MAR 31 2010
EXAMINER

Mar. 30. 2010 9:35AM 954-473-4907

No. 5146 P. 2

(H10000071249 3)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AUTO GALLERY OF PALM BEACHES 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:

Todd W. Klinton, Esq.

Name of Person

Firm/Company

8211 W Broward Blvd. Ste 375

Address

Plantation FL 33324

City/State and Zip Code

todd@lemerkinton.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Todd W. Klinton

Name of Person

at (954)

473-4900

Area Code & Daytime Telephone 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

(H10000071249 3)

Mar 30, 2010, 9:36AM, 954-473-4907

No. 5146 P. 4

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:

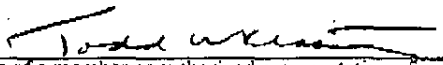
MGR = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|------------------|--|--|
| MGRM | JOHN Q NAIMI | 8211 W BROWARD BLVD #375 PLANTATION FL 33324 US | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGRM | JONATHAN J NAIMI | 8211 W BROWARD BLVD #375 PLANTATION FL 33324 US | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
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| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated March 30, 2010


Signature of a member or authorized representative of a member

Todd W Kliston

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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