L11000050505

(Requestor's Name)					
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(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Only State 2 Lip) Hone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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SECRETARY OF SIMILONS DIVISION OF CORFORATIONS

C. LEWIS

SEP 2 4 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2012

MICHAEL KHAIRI 500 NE 28 COURT POMPANO BEACH, FL 33064

SUBJECT: WHOLESALE AUTO GROUP LLC

Ref. Number: L11000050505

We have received your document for WHOLESALE AUTO GROUP 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.

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

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 112A00023786

COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT

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:

Michael KHAIRI
Name of Person
Wholesale Auto Group ICC
Firm/Company
500 NE 2815 CT
Address
Pampano Black Pl 33064
City/State and Zip Code
Sates & who lesale outo Croup net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael MHAIR; at 954 854 2736
Name of Person
Name of Person

Enclosed is a check for the following amount:

S25.00 Filing Fee

S30.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

SECRETARY OF STATE DIVISION OF CORPORATIONS

2012 OCT 23 PM 12: 52

imited Liability Company as it now appears on our records
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ______ and assigned Florida document number 2 110000 50 50 5 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Ompano Rank Fl., Florida 33064 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

Page 1 of 2

MGR = Manager

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:ĭ∕I = Ma	anaging Member		
<u>Title</u>	Name	Address	Type of Action
Pasidin :	A Michael KHAI.	Pompane Bunk 11 3300	Add Remove
Manager	HustBor wright	Ri SOONE 28 th of Pempane Bunk 11 3300 L SOONE 28 SK CA Pempone SUK 61 35	Add Remove
 			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendir	ng any other information, enter change((s) here: (Attach additional sheets, if necessary.)	
<u> </u>			SECRETARY OF STA OJVISION OF CORPORA 2012 OCT 23 PM 12
Dated	1 40/	··	110NS
-		r printed name of signee	KHAIR

Page 2 of 2

Filing Fee: \$25.00