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J. BRYAN

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# **COVER LETTER**

TO: Registration Section Division of Corporations
TO: Registration Section Division of Corporations  SUBJECT: The cheapest Anto Sales III (The 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:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
MHAMMED LOULIDT.  Name of Person
Firm/Company
32 12 - B West Tennessee St
Tallohassee, II 32304.  City/State and Zlp Code  MHAMMED 19 D Godmail. Con  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person MOHAMMED Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$60.00 Filing Fee, \$\text{Certified Copy} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$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 OF

(Name of the Limited Liability Compan (A Florida Limited Li	Anto Sales LLC.  y as it now appears on our records.)  ability Company)	
The Articles of Organization for this Limited Liability Company  Florida document number 12000366	were filed on March 15, 2012 and assigned	
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the appreviation "L.L.C."		
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	32.12.B west tennessee st Tallahassee, I L 37304.	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	3212-13 Nest Tenessee St Tallahassee, FL 3230C1	
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:	Enter Florida street address	
	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 **Title** <u>Name</u> **Address** Type of Action MGRM ABUBAKAR MOHAMMED ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) , <u>2012 .</u>. Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00