(Re	questor's Name)	<u>.</u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

N. Art

Office Use Only



300299453153

05/22/17--01029--024 \*\*25.00

O SIMMONS NAY 23 2017

## **COVER LETTER**

TO:	Registration Se Division of Cor			
CUD IE	-	AUTO SALES LLC		
SUBJE	CI;	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	indence concerning this matter	to the following:	
		HUSAM NASSAR		
			Name of Person	
			Firm/Company	
			Address	
		7124 CANTRELL CT, OF	RLANDO, FL 32835	
		SAFECPA@GMAIL.COM	City/State and Zip Code to be used for future annual report notif	ication
For furtl	her information c	oncerning this matter, please co	·	Ranony
HUSAM NASSAR 407 242-5369				
	Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclose	d is a check for the	ne following amount:		
\$25	i.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)
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURING Registration Section Division of Corport Clifton Building 2661 Executive Center of Couring Center of Couring Center of Ce	n ations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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:  Enter Florida street address  Florida	FUTURE AUTO SALES LLC		
Florida document number L16000222596  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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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:  Enter Florida street address  Florida	( <u>Name of the Limited Liability Compa</u> (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."  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:  Enter Florida street address  Florida	The Articles of Organization for this Limited Liability Company Florida document number	were filed on 12/08/2016	and assigned
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."  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:  Enter Florida street address  Florida	This amendment is submitted to amend the following:		
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:  Enter Florida street address  Florida	A. If amending name, enter the new name of the limited liab	pility company here:	
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:  Enter Florida street address  Florida	The new name must be distinguishable and contain the words "Limited Liabi		
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:  Enter Florida street address  Florida	Enter new principal offices address, if applicable:	4818 old Winter	Granden Rd
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  Florida	(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL	35811
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  , Florida			3
Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  , Florida	B. If amending the registered agent and/or registered o	ffice address on our records, enter	• • • • • • • • • • • • • • • • • • • •
New Registered Office Address:  Enter Florida street address , Florida		<u>e</u> :	
Enter Florida street address, Florida	Name of New Registered Agent:		
	New Registered Office Address:	Enter Florida street address	
	<del></del>	, Florida	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 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.

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	Type of Action
MGRM	ASSEM KATBEH	2310 BAESEL VIEW DR	Add
		ORLANDO, FL 32835	☐ Remove
			Change
	- *****		Add
			□ Remove
			□ Change
<del></del>			
			□ Remove
			Change
			□ Add
			☐ Remove
			☐ Change
<del></del>			
			□ Remove
			☐ Change
			Add
			☐ Remove
			□ Change

	•
	· · · · · · · · · · · · · · · · · · ·
ffec	tive date, if other than the date of filing: (optional)
an ei	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste
ocur	nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie e 90th day after the record is filed.
ntac	3/21/2017
aitl	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00