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## COVER LETTER

TO: Reg Divi	istration Se ision of Cor	ction porations	•	v
CUBICCE.	FUTURE A	UTO SALES LLC		
SUBJECT:		Name of Limite	ed Liability Company	
The enclosed	l Articles of .	Amendment and fee(s) are subm	itted for filing.	
Please return	all correspo	ndence concerning this matter to	the following:	
		ASSEM KATBEH		
			Name of Person	
			Firm/Company	
		2310 BAESEL VIEW DR		
			Address	
		ORLANDO, FL 32835		
		SAFECPA@GMAIL.COM	City/State and Zip Code	
		-	be used for future annual report	notification)
For further in	oformation e	oncerning this matter, please cal	l:	
ASSEM KA	твен		321 732-9599	)
	Name o	f Person	at () Area Code Day	ctime Telephone Number
Enclosed is a	i check for th	ne following amount:		
<b>■</b> \$25,00 F	iling 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)
	Registr Divisio P.O. Be	ING ADDRESS: ation Section on of Corporations ox 6327 assec, F1, 32314	STREET/COI Registration So Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations g 2 Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FUTURE AUTO SALES LLC			
( <u>Name of the Lin</u>	uited Liability Com (A Florida Limited	pany as it now appears on our records. I Liability Company)	)
The Articles of Organization for this Limited Florida document number L16000222596	• •	y were filed on 12/08/2016	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lia	bility company here:	
The new name must be distinguishable and contain the	words "Limited Lia	bility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2310 BAESEL VIEW DR ORLANDO, FL 32835	
B. If amending the registered agent and registered agent and/or the new registered of			enter the name of the
Name of New Registered Agent:	ASSEM KAT	твен	SEE LE
New Registered Office Address:	2310 BAESE		Y 2: 45
		Enter Florida street address	§∺ <b>5</b>
	ORLANDO	, Flor	ida <sup>32835</sup>
		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 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>	Name	<u>Address</u>	Type of Action
MGRM HUSAM NASSAR	HUSAM NASSAR	7124 CANTRELL CT	□ Add
		ORLANDO, FL 32835	<b>■</b> Remove
			☐ Change
			□ Remove
			Change
			□ Add
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n effective date is listed, the date must be te: If the date inserted in this bloc cument's effective date on the Dep	ffective date, but not an effective time, at	east after fling.) Pursuant to 605,020.
ted JUNE 12TH	2017	
13:0M 1211	مام	<b>28 1</b>
Lamp gat	enature of a member or authorized representative of a memb	tion 2 2 2 2
ASSEM KATBEH	Typed or printed name of signee	FILED ARYOR ASSEE, F
	Typed or printed name of signee	PH 2: OF STA
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	Page 3 of 3	7. <b></b>

Filing Fee: \$25.00