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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: American Auto Sale 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:
Imad Makled Name of Person
American Auto Sale LLC Firm/Company
9115 NW 105 Way Address
Medley FL 33190 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Imad Makled at (TG1) 512-4762 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Medley FL 33190 City/State and Zip Code Mte @ mycloseout City . Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: That Makled Name of Person at (TG1) Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\frac{1}{2}\$

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**

- AMerican Auto	Sale LLC			
(Name of the Limite	d Liability Company as it now appears of A Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Li	ability Company were filed on Oa		and assign	ned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liability company here	⊉ :		
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the desi	ignation "LLC" or the abbr	eviation "L.L.C	7,
Enter new principal offices address, if applica	ble:		17	Ser
(Principal office address MUST BE A STREE	<u> </u>		<u> </u>	
				<u> </u>
Enter new mailing address, if applicable:			P¥	왕 의 왕 의
(Mailing address MAY BE A POST OFFICE I	<u></u>		<u>-</u>	
				- Th
B. If amending the registered agent and/or the new registered of	_	our records, <u>enter th</u>	ie name of	the new
Name of New Registered Agent:	Imad Makled			
New Registered Office Address:	9115 NW 105 Way Enter Florida	a street address		
	Medley	, Florida	33178	
New Registered Agent's Signature, if changing R	egistered Agent:		Zip Coue	

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 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>	Address	Type of Action
M6R	Closeout City Inc	9115 NW 105 Way	Add
		Hedley, FC 33178	Remove
			Change
MGR	Imad Makked	9115 NW 105Way	E Add
		Medley, FL 33178	Remove
	6		Change
MGR.	Saoud Alfalah	9115 NW 105 Way	& Add
		Medley, FC 33178	□ Remove
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	Signature of a member or authorized representative of a member	70 10 10 10 10 10 10 10 10 10 10 10 10 10
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Filing Fee: \$25.00