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CUVER LETTER

| SUBJECT: Goodwheel Auto Sales 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: |
| Rhoderic Nicoleau Name of Person |
| INCLINE Consulting 3 Brand Mangement- |
| 13010 Son Antonio Woods Lane |
| Orlando, FL 32824 City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Rhoderic Nicoleau at (321) 246 - 1560 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| □ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) |

TO: Registration Section Division of Corporations

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| GOODWA | HEEL Auto Stres LIC File T |
|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| (Name of the Limit | HEEL AUTO STIES (Library) (A Florida Limited Liability Company) |
| The Articles of Organization for this Limited L. Florida document number <u>L1800016161</u> | 1 mag 10 |
| This amendment is submitted to amend the foll | lowing: |
| A. If amending name, enter the new name o | of the limited liability company here: |
| • | words "Limited Liability Company," the designation "LLC" or the abbreviation "L.IC." |
| Enter new principal offices address, if applic | |
| (Principal office address MUST BE A STREE | ET ADDRESS) |
| Enter new mailing address, if applicable: | |
| Enter new manning address, it applicable: (Mailing address MAY BE A POST OFFICE) | |
| | |
| B. If amending the registered agent and/or agent and/or the new registered office addre | registered office address on our records, enter the name of the new registeress here: |
| Name of New Registered Agent: | Rhoderic Nicoleau |
| New Registered Office Address: | 13010 San Antonia Wood Lane Enter Florida street address |
| | Orlando Florida 32824 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 antending 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 |
|----------------------|--------------------|---------------------------------------|----------------|
| AMBR | Rhoderic Nicoleou | 13010 Sun Antonio Woods Lo Orl, FL. 3 | 2824 D'Add |
| | | | □Remove |
| | | | □Change |
| MGR | Horold Nicolean | 13010 Son Antonio Woods Ln Orl, FL | 3282 1 Add |
| | | | □Remove |
| | Romaric Romaric | | □ Change |
| MGR Romorie Nicolean | | 108 Lubec St. Providence, R.I. 1 | 02 9045 Add |
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| | nding any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| (If an effi Note: | we date, if other than the date of filing: (optional) cetive 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 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records. |
| he record ord is fil | I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed. |
| Dated . | August 5th. , 2020. |
| | W. Nicol |
| | Signature of a member or authorized representative of a member |
| | |