

L19000049927

Q8 Auto Sale LLC
4389 Phillips Highway
Jacksonville, FL 32207

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

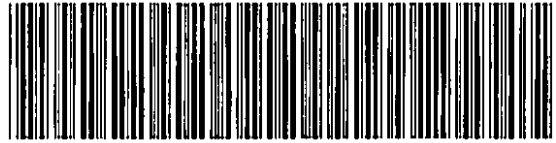
(Document Number)

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2021 MAY -5 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

Amend/Name Change

JUN 03 2021

D CUSHING

Date: 02/18/2021

Name: Suwaidan Aldufairi-owner and manager of Q8 Auto Sale LLC

To: State and Federal tax ID locations

Subject: Name change of Business

As owner/ operator and manager of the current name of Jordan Auto Export LLC, I would like to change the name of my company while maintaining my current tax ids. The name of business shall be changed to Q8 Auto Sale LLC.

Reason: We are not an auto export company and the name does not reflect well with that fact and we wanted to make it something that can be easily remembered by future customers.

Address: 4389 Phillips Highway, Jacksonville, FL; United States- 32207

Email: S_Suwaidan@yahoo.com

Daytime phone: 9048887999 OR 9048889777

Suwaidan Aldufairi
CFO

[Signature]

FILED
2021 MAY -5 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

RECEIVED

SUBJECT:

Jordan Auto Export
Name of Limited Liability Company

2021 MAY -5 AM 10:06

SECRET

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suwaidan aldhufairi
Name of Person

Jordan Auto Export LLC
Firm/Company

4389 Philips Hwy
Address

Jacksonville, FL 32207
City/State and Zip Code

autosales964@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Omar aldhufairi at (904) 888 9777
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|--|

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 21, 2021

Q8 AUTO SALE LLC
4389 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32207

SUBJECT: JORDAN AUTO EXPORT, LLC
Ref. Number: L19000049927

We have received your document for JORDAN AUTO EXPORT, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

In order to change the name of your company you must complete the attached application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 121A00008269

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Jordan Auto Export LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2021 MAY -5 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 02/20/2018 and assigned
Florida document number L19000049927

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Q8 Auto Sale LLC
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4389 Philips Hwy
Jacksonville, FL 32207

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4060 Pittman Dr
Jacksonville, FL 32207

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:

Sawaidan aldhufairi

New Registered Office Address:

4389 Philips Hwy
Enter Florida street address

Jacksonville, Florida 32207
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Suwaidan alkhugairi	4060 Pittman Dr Jacksonville, FL 32207	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Omar alkhugairi	4060 Pittman Dr Jacksonville, FL 32207	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Jehan Sayer	4060 Pittman Dr Jacksonville, FL 32207	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

I'm updating articles of organization & changing the addresses also a new authorized member and an agent. the old articles include the old address with the old owner. ~~no~~

and also I'm changing the dealership name to Q8 Auto Sale LLC.


[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 04/30/2021 

Signature of a member or authorized representative of a member

Suwardan Alshufairi

Typed or printed name of signee