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(Re	questor's Name)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA O9 AUG 17 PH 2: 05

Amend 119/09

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORP	E OF CORPORATION: AUTO EXPORTERS USA, INC.			
DOCUMENT NU	MBER:	P08000068749		
The enclosed Artica	<i>les of Amendment</i> and f	ee are submitted for filing.		
Please return all con	rrespondence concerning	g this matter to the following:		
_		JULIA SMITH		
		Name of Contact Person		
-	AUT	O EXPORTERS USA, INC.		
		Firm/ Company		
-	5 ROYAL COT	TAGES COOKHAM DEAN COMMON Address		
		Aduless		
-	MAIDEN	HEAD, BERKSHIRE SL69PA UK City/ State and Zip Code		
	iulia	smith@wmgholdings		
	E-mail address: (to be	e used for future annual report notification)		
For further informa	tion concerning this ma	tter, please call:		
	harles Mogford	at (561) 245-5159		
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amou	nt made payable to the Florida Department of State:		
 \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)		
<u>Mailing Ad</u> Amendmen		Street Address Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



AUTO EXPORTERS USA INC.

filed with the Florida Dept. of State)
068749
f Corporation (if known)
orida Statutes, this Florida Profit Corporation adopts the following
corporation:
The new cord "corporation," "company," or "incorporated" or the gnation "Corp," "Inc," or "Co". A professional corporation and association," or the abbreviation "P.A."
le: 5 ROYAL COTTAGES
DRESS) COOKHAM DEAN COMMON
MAIDENHEAD, BERKSHIRE SL69PA
0X) 5 ROYAL COTTAGES
COOKHAM DEAN COMMON MAIDENHEAD, BERKSHIRE SL69PA UK
ered office address in Florida, enter the name of the doffice address:
(Florida street address)
, Florida (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PRES	DENNIS R DIEHL	4901 COCONUT BLVD WEST PALM BEACH, FL 33411	
	· · · · · · · · · · · · · · · · · · ·		
(attach a	dditional sheets, if necessary). (Be	specific)	
provisi		e, reclassification, or cancellation of ent if not contained in the amendme	

The date of each amendment(s) adoption: <u>08/14/09</u>
Effective date if applicable:	(date of adoption is required)
Effective date it appreade.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by	***
•	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated 8	14/09 D. D. A. D.
selec	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	DENNIS R. DIEHL
	(Typed or printed name of person signing)
	Presipont
	(Title of person signing)