P1000005393

(Requestor's Name) - (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:

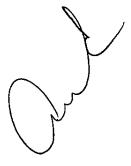
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Alsaigh Aut	to Sales Inc	
DOCUMENT NUME	BER: P1000000539	3	
	of Amendment and fee are su		
Please return all corres	spondence concerning this mat	ter to the following:	
	Khalid Toma		
		Name of Contact Person	1
		Firm/ Company	
	4113 Alesbury Dr		
		Address	
	Jacksonville, FL 3		
	•	City/ State and Zip Code	2
alsa	aigh75@yahoo.co	om	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter. pleas	se call:	
	· · · · · · · · · · · · · · · · · · ·	at () de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

Alsaign Auto Sales, Inc	
(Name of Corporation as currently filed with the Flor	ida Dept. of State)
P1000005393	
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	<u>a</u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Ec.
	2
C. Enter new mailing address, if applicable:	\$\$ 29
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	9 AM
	<u></u>
D. <u>If amending the registered agent and/or registered office address</u> new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	Florida
New Registered Office Address: (City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
Signature of New Registered Ag	ent 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Saad Rammoo	7920 Merrill Rd
Add		· · · · · · · · · · · · · · · · · · ·	Unit 1704
X Remove			Jacksonville, FL 32277
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			······································

	nal sheets, if necessa	ry). (Be specific)		
	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
<u>, </u>					
<u>.</u>					
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•					
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an amendmo rovisions for	ent provides for an rimplementing the	exchange, reclass amendment if no	sification, or can t contained in th	<u>cellation of issued s</u> e amendment itself	<u>hares,</u> :
(if not app	plicable, indicate N/A	4)	•		_
			•		
·· -	•				
	•				
	<u> </u>				

The date of each amendment(s) adoption: 8/27/2012
Effective date if applicable: 8/27/2012 (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 08/27/2012
Dated
Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Khalid Toma
(Typed or printed name of person signing)
President
(Title of person signing)