H22000178397 3

L22000095689

Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

LARBI IHSSANE LLC

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May 20, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LARBI IESSANE LLC
4617 EAGLE PARK DR
KISSIMMEE, FL 34769

SUBJECT: LARBI IESSANE LLC
REF: L22000095689

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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) 245-6823.

Annette Ramsey
OPS

FAX Aud. #: H22000178397
Letter Number: 722A00011556

H22000185993

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LARBI HISSANE 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:

LARBI HISSANE
Name of Person

Firm/Company

4617 EAGLE PEAK DR
Address

KISSIMMEE, FL 34769
City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LARBI HISSANE at (407) 764-2086
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $25.00 Filing Fee ■ $30.00 Filing Fee & Certificate of Status ☐ $55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ $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

H22000185993

H22000478693

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LARBI HISSANE LLC

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

The Articles of Organization for this Limited Liability Company were filed on 03/08/2022 and assigned Florida document number L22000095689.

This amendment is submitted to amend the following:

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

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)

4617 EAGLE PEAK DR
KISSIMMEE, FL 34769

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

4617 EAGLE PEAK DR
KISSIMMEE, FL 34769

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: _____

New Registered Office Address: _____
Enter Florida street address

_____, Florida _____
City *Zip Code*

2022 MAY 20 PM 12:25
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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

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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

Title	Name	Address	Type of Action
MBR	LARBI HSSANE	4617 EAGLE PEAK DR	☐Add
		KISSIMMEE, FL 34769	☐Remove
			■Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
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			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change

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

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)(a):

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 _____ . _____ .

_____

Signature of a member or authorized representative of a member

LARBI IISSANE

_____

Typed or printed name of signee

Filing Fee: $25.00