

29/8/22, 18:42

Division of Corporations

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

L22000317215

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000292997 3)))



H220002929973ABC9

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To:  
 Division of Corporations  
 Fax Number : (850)617-6383

From:  
 Account Name : DAVID NOHRA ZAKIA  
 Account Number : I20220000125  
 Phone : (239)494-0057  
 Fax Number : (239)913-6599

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Tuoficinaenusa@gmail.com

2022 AUG 30 PM 3:32

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ANTOUN GLOBAL IMPORT LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SECRETARY OF STATE  
TALLAHASSEE, FL 09007

2022 AUG 30 PM 3:32

APPROVED  
AND  
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 30 2022

Brumbley

### COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ANTOUN GLOBAL IMPORT 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:

DAVID NOHRA ZAKIA

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

28715 ALESSANDRIA CIRCLE

\_\_\_\_\_  
Address

BONITA SPRINGS, FLORIDA ZIP CODE 34135

\_\_\_\_\_  
City/State and Zip Code

tuoficinaenusa@gmail.com

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

For further information concerning this matter, please call:

DAVID NOHRA ZAKIA

\_\_\_\_\_  
Name of Person

239 4940057  
at ( )

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANTOUN GLOBAL IMPORT 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 08/29/2022 and assigned Florida document number L22000317215

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

City

Florida

Zip Code

2022 AUG 30 PM 3:32 APPROVED AND FILED

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	DAVID NOHRA ZAKIA	28715 ALESSANDRIA CIRCLE BONITA SPRINGS	<input type="checkbox"/> Add
		FLORIDA, ZIP CODE 34135	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ISABEL ANTOUN	28719 ALESSANDRIA CIRCLE BONITA SPRINGS	<input checked="" type="checkbox"/> Add
		FLORIDA, ZIP CODE 34135	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RICHARD ANTOUN	28719 ALESSANDRIA CIRCLE BONITA SPRINGS	<input checked="" type="checkbox"/> Add
		FLORIDA, ZIP CODE 34135	<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

