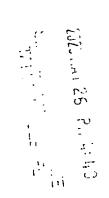
## L23000 117577

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

|                    |                               | (  | COVER LEGIER  |   |          |
|--------------------|-------------------------------|--|---|---|----------|
|                    | gistration Se<br>ision of Cor |  |   |   |          |
| SUBJECT:           |                               | ADE, L.L.C                                   |   |   |          |
| SUBJECT.           | ****                          | Name of Lim                                  | ited Liability Company .  | <del></del>   |          |
| The enclosed       | Articles of                   | Amendment and fee(s) are sub                 | mitted for filing.  |   |          |
| Please return      | all correspo                  | ndence concerning this matter                | to the following:   |   |          |
|                    |                               | G&D Accounting and Tax                       | es Service  | . —   |          |
|                    |                               |  | Name of Person  |   |          |
|                    |                               | Maher Malak                                  |   |   |          |
|                    |                               |  | Firm/Company  |   |          |
|                    |                               | 2033 SW 173rd Ave                            |   |   |          |
|                    |                               |  | Address   |   |          |
|                    |                               | Miramr, FL 33029                             |   | ·   | :<br>-   |
|                    |                               |  | City/State and Zip Code   | <del></del>   | C)       |
|                    |                               | maher_malak@hotmail.com                      |   |   | ص<br>: : |
|                    |                               | E-mail address: (                            | to be used for future annual report notification)                     |   |          |
| For further is     | nformation co                 | oncerning this matter, please ca             | all:  | t <sup>≜1</sup> :   | (<br>!-  |
| Maher Mala         |                               |  | 305 502-8281  |   |          |
|                    | Name of                       | Person                                       | Area Code Daytime Telephor  | ne Number   |          |
| Enclosed is a      | check for th                  | e following amount:                          |   |   |          |
| <b>≅</b> \$25.00 F | filing Fee                    | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & □ Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee,<br>Certificate of Status<br>Certified Copy<br>(additional copy is enclosed) |          |

Mailing Address:
Registration Section
Division of Corporations

P.O. Box 6327 Tallahanna El 20214

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 M. Mannas Street Suite 910

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| MOMO TRADE, L.L.C  |   |                              |
|--|---|------------------------------|
| (Name of the Limited Liability Compa<br>(A Florida Limited I   | ny as it now appears on our records.<br>Jability Company) | )                            |
| The Articles of Organization for this Limited Liability Company  | were filed on 03/06/2023                                  | and assigned                 |
| lorida document number L23000117577.   |   |                              |
| his amendment is submitted to amend the following:   |   |                              |
| a. If amending name, <u>enter the new name of the limited liab</u>   | ility company here:                                       |                              |
| he new name must be distinguishable and contain the words "Limited Liabil  | ity Company," the designation "L.L.C"                     | or the abbreviation "L.L.C." |
| inter new principal offices address, if applicable:  |   | ~~                           |
| Principal office address MUST BE A STREET ADDRESS)   |   | 7 60                         |
|  |   |                              |
|  |   | 1, PS                        |
| Control of the contro |   | , -m                         |
| inter new mailing address, if applicable:  |   | <u> </u>                     |
| Mailing address MAY BE A POST OFFICE BOX)  | ·   |                              |
|  |   |                              |
|  |   | ( 1                          |
| 3. If amending the registered agent and/or registered office a   | address on our records, <u>enter t</u>                    | he name of the new regist    |
| gent and/or the new registered office address here:  |   |                              |
|  |   |                              |
| Name of New Registered Agent:  |   |                              |
| New Registered Office Address:   |   |                              |
|  | Enter Florida street address                              |                              |
|  | , Flo   | rida                         |
|  | 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>      | Address              | Type of Action |
|--------------|------------------|----------------------|----------------|
| MGR          | SABET, MOWAFAK N | 141 IPSWICH STREET   | AJd            |
|              |                  | BOCA RATON, FL 33487 | □Remove        |
|              |                  |                      | □Change        |
| <del>-</del> |                  |                      | ⊡Add           |
|              |                  |                      | □Remove        |
|              |                  |                      | □ Change       |
|              |                  |                      | CT Child       |
|              |                  |                      | Change         |
|              |                  |                      | □ Add-3        |
|              |                  |                      |                |
|              |                  |                      | □Add           |
|              |                  |                      | □Remove        |
|              |                  |                      | ☐ Change       |
|              |                  |                      | □Add           |
|              |                  |                      | Remove         |
|              |                  |                      | Channe         |

| MA   |                                   | <del></del>                          |                                       |                                     | <u></u>                                   |               | ····                    |
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|  |                                   |                                      |                                       |                                     |   | <u>, T</u>    | Ė.                      |
|  |                                   |                                      |                                       |                                     |   | r .           | <u>C:</u>               |
|  | <del></del>                       |                                      | · · · · · · · · · · · · · · · · · · · | · · · · · ·                         |   |               |                         |
|  |                                   |                                      |                                       |                                     |   |               |                         |
| fective date, if other than the neffective date is listed, the date muster. If the date inserted in this blument's effective date on the December 2. | be specific and coock does not me | annot be prior to<br>et the applical | o date of filing cole statutory f     | r more than 90 di<br>ling requireme | (optional) we after filing must this date | .) Pursuant t | o 605.020<br>e listed c |
| ecord specifies a delayed effectiv<br>is filed.  | ; date, but not a                 | n effective tin                      | ne, at 12:01 a.                       | m, on the earlie                    | rof: (b) - Ti                             | he 90th day   | after th                |
| March, 16th  |                                   | 2023                                 |                                       |                                     |   |               |                         |
|  | 164-                              |                                      |                                       |                                     |   |               |                         |
|  | Signature of a me                 |                                      |                                       |                                     |   |               |                         |