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COVER LETTER

	stration Section of Corp			
SUBJECT: _	Na	ymahal Prope Name of Lim	ited Liability Company	
The enclosed 2	Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return a	ll correspon	dence concerning this matter	to the following:	
		makal Properties LLC Name of Limited Liability Company sendment and fee(s) are submitted for filing. sence concerning this matter to the following: Boman Name Name of Person Noveroz Properties LLC Firm/Company 290 McGuinness Blvd Address Brooklyn, NY 11222 City/State and Zip Code total - const@uahao.com E-mail address: (to be used for future annual report notification) erning this matter, please call: Nami at (718) 383-16834 Area Code Daytime Telephone Number		
		290 M	10 Guinness Blyc Address	<u> </u>
			Chylotate and 21p code	
		E-mail address: (1 - const@yahoo	COM fication)
For further inf	ormation co	ncerning this matter, please ca	all:	
В	Name of l	Najmi Person	at (<u>718</u>) <u>383 -</u> Area Code Daytimo	し836 e Telephone Number
Enclosed is a c	check for the	following amount:		
□ \$25,00 Fil	ing Fee	☐ \$30,00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Vaimahal 1	Properties LLC	2022 HAY 31 AM 9: 27			
(Name of the Limited Li (A F	ability Company as it now appears on our lorida Limited Liability Company)	TALL AHASSEE, FL			
The Articles of Organization for this Limited Liabil	ity Company were filed on	28 2011 and assigned			
Florida document number <u>Li100012846</u>	· <u>t</u>				
This amendment is submitted to amend the following	g:				
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 A	DDRESS)				
	<u></u>				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>				
B. If amending the registered agent and/or registered agent and/or the new registered office	•	ecords, enter the name of the nev			
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street	address			
_	Сиу	Zıp 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	Pervez Najmi	7705 INDIAN PODGE TRAILA	∑ ⊠ Add
	-	7705 INDIAN PODE TRAILA KISSIMMEE, FL 34747	Remove
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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blocument's effective date on the D	lock does not mee	t the applicable st	of filing or more that atutory filing requ	(optiona on 90 days after filin nirements, this da	l) ng.) Pursuar te will not	n to 605.0 be listed	0207 (3) d as the
the record specifies a delayed) The 90th day after the rec	ord is filed.					earlie	r of:
Dated 5/1/22							
	Suparture of 4 men	bor or with rized of	enresentative of a r	nember			
	Signature of a men	EKUEZJ. P ped or printed name	epresentative of a r	ile italyer			

Page 3 of 3

Filing Fee: \$25.00