

L020000022823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

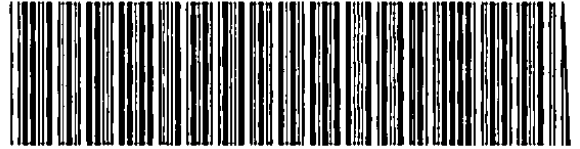
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2022 DEC -1 AM 9:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** MOURAD INVESTMENTS, 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:

BASSAM MOURAD

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

MOURAD INVESTMENTS, LLC

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

P.O. BOX 226197

\_\_\_\_\_  
Address

MIAMI, FL 33131-3791

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

SAM@MOURAD1.COM

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

For further information concerning this matter, please call:

BASSAM MOURAD

305

785-5858

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

10  
**ARTICLES OF ORGANIZATION  
OF**

MOURAD INVESTMENTS, 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 09/04/2002 and assigned  
Florida document number 1.02000022827.

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)**

19111 COLLINS AVE

UNIT 704

SUNNY ISLES BEACH, FL 33160

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

P.O. BOX 226197

MIAMI, FL 33131-3791

**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:

19111 COLLINS AVE, UNIT 704

*Enter Florida street address*

SUNNY ISLES BEACH, Florida 33160

*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**

or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of</u>
MGRM	BML GLOBAL, INC.	P.O. BOX 226197	<input type="checkbox"/> Add
		MIAMI, FL 33131-3791	<input type="checkbox"/> Remc
			<input checked="" type="checkbox"/> Chang
MGRM	MOURAD, BASSAM	P.O. BOX 226197	<input type="checkbox"/> Add
		MIAMI, FL 33131-3791	<input type="checkbox"/> Remov
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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 605.02

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 11-25-2022

  
Signature of a member or author

Signature of a member or authorized representative of a member

BASSAM MOURAD, MGRM

Typed or printed name of signee