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2026 PET - 9 PET N: 35

## **COVER LETTER**

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Corporations				
SANAYAN	INVESTMENTS, LLC			
SUBJECT: Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Nafis A Dewji			
		Name of Person		
	SANAYAN INVESTMEN	тѕ		
	<del></del>	Firm/Company		
	9779 Coronado Lake Dr	ve		
		Address		
	Boynton Beach, FL 3343	37		
		City/State and Zip Code		
	Nadiyadewji@yahoo.com			
		to be used for future annual report noti	ncation)	
For further information of	concerning this matter, please c	all;		
Nafis A Dewji		561 5773893		
Name o	of Person	at () Area Code Daytim	e Telephone Number	
Enclosed is a check for t	he 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 Addre	Section	Street Address: Registration Se		
Division of C	Lorporations	Division of Cor	porations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

222.55 -9 PM 4:35

SANAYAN INVESTMENTS, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on 03/17/2004	and assigned
Florida document number L04000020659		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	<del></del>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office	address an our records enter th	e name of the new registe
gent and/or the new registered office address here:	address on our records, enter the	e name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del></del>
	Enter r torida street addr <del>es</del> s	
<del></del>	, Flori	ida

## 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>	Type of Action
MGRM Dewji, Anver N	9779 Coronado Lake Drive		
		Boynton Beach, Fl 33437	■Remove
			□Change
MGRM	Dewji, Yasmin A	9779 Coronado Lake Drive	□Add
		Boynton Beach, Fl 33437	■Remove
MGRM	Dewji, Nafis A	9779 Coronado Lake Drive	Add
		Boynton Beach, Fl 33437	□Remove
		~	□Add
		□Remove	
		□Change	
		□Add	
		□Remove	
		□Change	
		□Add	
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			Ti Channa

amenumg	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<del> </del>
fan effective da <u>Note:</u> If the d	te, if other than the date of filing:
record special is filed.	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
June 4	, 2020
	Na M
	Signature of a member or authorized representative of a member
Na	/ rfis A Dewji
	Typed or printed name of signee

Filing Fee: \$25.00