## L050000 457 FG

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## **COVER LETTER**

TO: Registration Sec Division of Corp			
E & G	LLC		
SUBJECT:		ted Liability Company	induces and the few representation processes the \$1990-99.00
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Babak Goha	ıri	
		Name of Person	general de Maria de de la desta de la dest
		Firm/Company	
	9931 Treasu	ire Cay Lane	
		Address	
	Bonita Sprin	gs, FL 34135	
		City/State and Zip Code	
	babak@gohari.org	] to be used for future annual report notifi	cation)
For further information of	oncerning this matter, please ca	ult;	
Babak Goh	ari	<sub>at,</sub> 239 <sub>,</sub> 287-96	669
Name o	f Person	Area Code Daytimo	Telephone Number
Enclosed is a check for th	ne 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 enclused)

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 26, 2014

BABAK GOHARI 9931 TREASURE CAY LANE BONITA SPRINGS, FL 34135

SUBJECT: E & G LLC

Ref. Number: L05000045789

We have received your document for E & G LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can not file an amendment on an administratively dissolved entity.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 514A00013982

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E & G LLC				
(Name of the Limite)	I Liability Compa A Florida Limited	ny as it now appears on o liability Company)	ur records.)	
The Articles of Organization for this Limited Lia Florida document number L05000045789	bility Company	were filed on May 5	5, 2009	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
E&G of LcHigh Acres, the new name must be distinguishable and end with the w	ords "Limited Liab	ollity Company," the design	ation "LLC" or the n	bbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	9931 Treasure	e Cay Lane	32
(Principal office address MUST BE A STREET	<u> ADDRESS)</u>	Bonita Springs	s, FL 34135	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		9931 Treasure Bonita Springs		FID PM 12: 01
B. If amending the registered agent and/or registered agent and/or the new registered off  Name of New Registered Agent:		<u>e</u> :	records, enter	the name of the new
New Registered Office Address:	9931 Treasure Cay Lane  Finer Florida street address			
	Bonita Springs		Florida 34135 Zip Code	
	······································	City		Zip Code
New Registered Agent's Signature, if changing R	egistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the re company has been notified in writing of this c	r and complete tered agent as egistered office hange.	performance of my d provided for in Chapt	luties, and I am f gr 605, F.S. Or, afirm that the lin	umiliar with and if this document is nited liability

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member **Title** Name. <u>Address</u> **Type of Action** Babak Gohari 9931 Treasure Cay Ln. **MGMR** Bonita Springs, FL 34135 □ Remove 12680 Darby Brooke Ct. Abdolhossein Ejtemai MGMR Woodbridge, VA 22192 ☐ Remove □ Add ☐ Remove \_□ ∧dà ☐ Remove

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for address.	Both are existing and author	rized
managing m	nembers.	
****		
2. Effective date, if other than (The effective date must be specific the date this document is filed by	n the date of filing: c. cunnot be prior to date of receipt or filed date and cannot be mor the Florida Department of State)	(optional) te than 90 days after
Dated June 24	2014	•
Babak Go	Signature of a member or authorized representative of a non-	nember
	Typed or printed name of signee	

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Filing Fee: \$25.00

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