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(City/State/Zip/Phone #)

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(Business Entity Name)

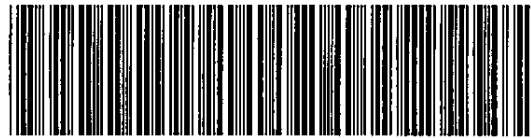
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NORNAZ ENTERPRISE 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:

MICHAEL G CHANDROSS

(Name of Person)

MICHAEL G CHANDROSS CPA PA

(Firm/Company)

2300 West Sample Rd

(Address)

Pompano Beach FL 33073

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael G Chandross

(Name of Person)

at ( 954 ) 979-9900

(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 &  
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\$60.00 Filing Fee,  
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(additional copy is enclosed)

**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**

**NORNAZ ENTERPRISE LLC**

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on NOVEMBER 2, 2006 and assigned document number L06000106731.

**SECOND:** This amendment is submitted to amend the following:

THE NAME AND ADDRESS OF THE MANAGING MEMBERS TO:

NASEERUDEEN MOHAMED, 2301 NW 82ND WAY, SUNRISE FL 33322 and

NORMA MOHAMED , 2301 NW 82ND WAY, SUNRISE FL 33322

THE MAILING ADDRESS TO:

PO BOX 934421

MARGATE FL 33093

Dated \_\_\_\_\_, \_\_\_\_\_.

Norma Mohamed

Signature of a member or authorized representative of a member

NORMA MOHAMED

Typed or printed name of signee

**Filing Fee: \$25.00**

**FILED  
SECRETARY OF STATE  
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