

LD6000120434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

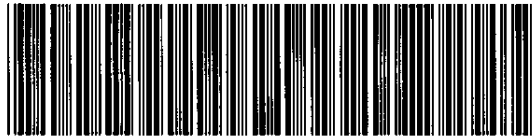
(Business Entity Name)

(Document Number)

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05/14/09--01012--003 **25.00

FILED
2009 MAY 14 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

MAY 15 2009

EXAMINER

LAURA A. VOGEL, P.A.

ATTORNEY AT LAW

May 11, 2009

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

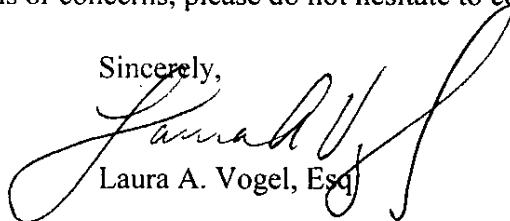
Re: Ahmad Barhoush & Abdul Shatara Enterprises, LLC
Articles of Amendment

Dear Sir Madam:

I have enclosed for filing the Articles of Amendment for the above referenced corporation together with my client's check no. 1054, in the amount of \$25.00, representing your fee for same.

Should you have any questions or concerns, please do not hesitate to contact this office.

Sincerely,



Laura A. Vogel, Esq

Enclosure

cc: Ahmad Barhoush, 225 Sw 1st Street, Belle Glade, FL 33430

Abdul Shatara, 200 S. Main Street, Belle Glade, FL 33430

WPDocs/Corporations/Barhoush&Shatara/A.Barhoush&A.ShataraEnterprises/DivCorp5-11-09

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ahmad Barhoush & Abdul Shatara Enterprises, 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:

Laura A. Vogel, Esq.
Name of Person

Laura A. Vogel, P.A.
Firm/Company

1035 S. State Road 7, Suite C-215
Address

Wellington, Florida 33414
City/State and Zip Code

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

For further information concerning this matter, please call:

Laura A. Vogel, Esq. at (561) 792-7115
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/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

2009 MAY 14 PM 12:15

Ahmad Barhoush & Abdul Shatara Enterprises, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/19/2006 and assigned
Florida document number L06000120434.

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 end with 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

225 SW 1st Street, Belle Glade, FL 33430

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:

Samar Barhoush

New Registered Office Address:

225 SW 1st Street

Enter Florida street address

Belle Glade

City

Florida

33430

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 608, 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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

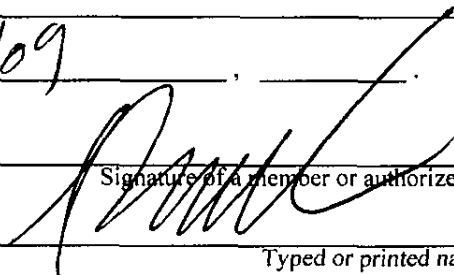
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated

5/8/09

Signature of a member or authorized representative of a member



Typed or printed name of signee

Samar Barboosh

FILED
2009 MAY 14 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA