## L070000067150

Office Use Only



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## **COVER LETTER**

TO: Re

**Registration Section Division of Corporations** 

SUBJECT: GOLDEN JUBILEE 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:

SANAYA AJANI	
(Name of Person)	n
MAGNIFIC FINE TEWEIERS	=
554 HEATHER OAK COVE	MO
ALTAMONTE SPRINGS, FL 32714	

For further information concerning this matter, please call:

ZAHEER AJANI

at (321) 946-5303

(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)

© 560.00 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

## (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

(. t. Fortal 2. Linear Endowly Company)
The Articles of Organization for this Limited Liability Company were filed on
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 "LbC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: 554 HEATHEROOK COVE
(Principal office address MUST BE A STREET ADDRESS) PLIATIONTE SPRINCE,
FLORIDA 32714
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  PLIAMONTE SPRINGS,  FLORIDA 32714
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: SANAYA PJANI
New Registered Office Address: 554 HE ATHER OAK COVE
(Enter Florida street address)
ALTAMONTE SPRINGS, Florida 32714 (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 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.

(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 Type of Action <u>Address</u> <u>Title</u> Name 1 DILCHAD N AJANI MGR Add Remove ZAHEER AJBNI MGRM Remove SAMAYA AJANI MGRM 554 HEATHEROMK COVE ALTAMONTE SPRINGS, Remove ☐ Add Remove And Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Lth Dated DECEMBER . **2008**. Signature of a member or authorized representative of a member NAYA A JANI
Typed or printed name of signee SANAYA

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Filing Fee: \$25.00