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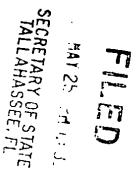
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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
	Mughal & McRa	ne Executive Search, LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Teenaz F. Mughal	
		Name of Person	
	Mugha	d & McRae Executive Search, LL	.C
		Firm/Company	
		951 NW 7th Ave, Suite 600	
		Address	
		Miami, Florida 33136	
		City/State and Zip Code	
		Tina@mughalmcrae.com	
	E-mail address: (to be used for future annual report no	otification)
For further information c	oncerning this matter, please c	all:	
Tecnaz F	. Mughał	305 753-8462	
Name o	f Person		ime Telephone Number
Enclosed is a check for the	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 enclosed)
Mailing Addres		Street Address:	action
Registration S Division of C		Registration S Division of Co	
P.O. Box 632	•	The Centre of	•
Tallahassee, I	FL 32314		roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION FILED **OF**

4. BAY 25 PH 123

Muchal & McRae Executive Search 11C CECOET ...

(Name of the Limited Lin (A F)	ability Company as it now appear orida Limited Liability Company)	irs on out Act drug A	<u>'OF STATE</u> SSEE, FL
The Articles of Organization for this Limited Liability Florida document number		0/2/2002	and assigned
This amendment is submitted to amend the following	ā.		
A. If amending name, enter the new name of the	limited liability company h	ere:	
The new name must be distinguishable and contain the words	Limited Liability Company," the	designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	 		
(Principal office address MUST BE A STREET AL	ODRESS)		
			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
			
B. If amending the registered agent and/or registered agent and/or the new registered office address her		records, <u>enter the n</u>	ame of the new regist
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida street address	
		, Florida	
	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 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>	Name	Address	Type of Action
S	Mohammad Ameer Mughal	1951 NW 7th Ave Ste 600, Miami FL 33136	🗆 Add
			Remove
P,MGR	Teenaz F. Mughal	1951 NW 7th Ave Ste 600, Miami FL 33136	🗆 Add
			□Remove
		 	🖻 Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			□ Change
			□Adđ
			□Remove
			□ Change
			□Add
			□Remove
			Channe

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cument's effective date on the Department of State's records.	(ontional)
ecord specifies a delayed effective date, but not an effective times filed.	e, at 12:01 a.m. on the earlier of: (b) The 90th day after the
May 20 , 2022	
Signsture of a member of authori	ed representative of a member
Teenaz F. Mi	

Filing Fee: \$25.00