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S. HAWKES

OCT 1 9 2010

EXAMINER

## **COVER LETTER**

	on of Co	rporations		
SUBJECT:		Nishat E	Interprises LLC	
SOBSET	•		ted Liability Company	
The enclosed A	rticles of	Amendment and fee(s) are sub	omitted for filing.	
Please return al	l corresp	ondence concerning this matter	to the following:	
			Mohammad Sheikh	
		N1	ishat Enterprises LLC	
			Firm/Company	
		1	215 Creighton Road	
		F	Pensacola, FL 32504	
			City/State and Zip Code	
		E-mail address: (	mshelkhp@aol.com to be used for future annual report notification)	
For further info	rmation (	concerning this matter, please of	<u> </u>	
		ammad Sheikh	at ( 850 ) 477-3643	
	Name	of Person	Area Code & Daytime Telephone Number	
Enclosed is a cl	eck for t	the following amount:		
<b>▼ \$25.00</b> Filin	g Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Certified Copy (additional copy is enclosed)  Certificate o Certified Co (additional co	f Status &
	Regist Division P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, 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

Nishat Enterprises LLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	v Company were filed on Decen	nber 1, 2007 and assigned
Florida document numberL07000122930	Company were men on	
Fiorida document number	<del></del> -	
This amendment is submitted to amend the following	:	007 18 PM
A. If amending name, enter the new name of the l	imited liability company here:	¥ 2: C
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," th	e designation "LLC for the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office a		cords, enter the name of the new
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 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:

**Type of Action** 

[∕] Add

☐ Add Remove

∏Add Remove

Add Remote

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Remove

MGR = Manager MGRM = Managing Member <u>Address</u> <u>Title</u> Name MGR Mohammad Sheikh 1215 Creighton Road Pensacola FL 32504

		∐Add
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		Add
f em	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Mohammad Sheikh Typed or printed name of signee

Filing Fee: \$25.00