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TALLANDON SIAMS

S. YOUNG

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:	AR	ASh LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	=	Name of Person	-ovpour	
		ARASH LL		
		Firm/Company		
	<u>892 Bri</u>	Shtuater (cic .	一层的 苏
		City/State and Zip Code	2751	FIL JAN 21
	Ken. Astoe E-mail address: (City/State and Zip Code Company of the control of	Homes-Com report notification)	
For further information c	oncerning this matter, please c			5 5
<u>Ken</u>	SHOE. f Person	at (407)	281-1459 Daytime Telephone Number	 er
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	Certific Certified	ate of Status &

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**

	ARASH LLC.			
(<u>Name of the Limited</u> (A	d Liability Company as it in A Florida Limited Liability (<u>iow appears on o</u> Company)	<u>ur records.</u>)	
The Articles of Organization for this Limited Lia	bility Company were fi	led on NOVe	mBe(,23,2	∞ ¶ and assigned
Florida document number L09001124				
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liability cor	mpany here:		
			ر المحدد مراجعين مراجعين	² 중
The new name must be distinguishable and contain the wo	rds "Limited Liability Comp	oany," the designa	tion "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applica	ble:			72
(Principal office address MUST BE A STREET			10	, TA
			40 de 10 de 11 de	
Enter new mailing address, if applicable:		892 8	oright wat	هد ندر_
(Mailing address MAY BE A POST OFFICE B	 BOX)	mail	and FL	32151
B. If amending the registered agent and/o registered agent and/or the new registered off			records, enter	the name of the n
New Registered Office Address:	692 Brigh	Luntea	C 24	
New Registered Office Address.		Enter Florida str	eet address	
	mailla	cl	. Florida	32751
	Ciņ	,		Zip Code
New Registered Agent's Signature, if changing Re	egistered 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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = M $AMBR = A$	anæger uthorized Member			
<u>Title</u>	<u>Name</u>		Address	Type of Action
MGK	Kamvar	Ashoc:	892 Bright water cir mailland FL 38751	⊠ Add
				Remove
				Change
MGR	Parnisa	mollakar	Limi 892Bright water cir mailked FL 32759	Add
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ote: If the date inserted in	an the date of filing:ate must be specific and cannot this block does not meet the the Department of State's	e applicable sta	f filing or more than	(option 190 days after fil rements, this d	ing.) Pursuan	nt to 605.0 be listed
record specifies a de The 90th day after the	elayed effective date, l e record is filed.	but not an e	ffective time,	at 12:01 a.r	n. on the	earlie
ted 1181	16 ,	· .	\			
	Signature of a member	or authorized re	presentative of a me	ember		

Page 3 of 3

Filing Fee: \$25.00