

L10000043209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

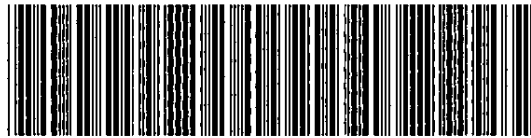
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/27/10--01012--006 **25.00

T. CLINE

APR 28 2010

EXAMINE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 APR 27 AM 11:09

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: New Razi 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:

Ben Noveen

Name of Person

New Razi LLC

Firm/Company

PO Box 50364

Address

Pompano Beach, FL 33074

City/State and Zip Code

noveen@comcast.net

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

For further information concerning this matter, please call:

Ben Noveen

Name of Person

at (954)

785 3322

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)

☐ \$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

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2010 APR 27 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

New Razi LLC

Page 1 of 2

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

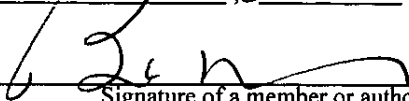
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Fatemeh Khalilpour	10201 Grosvenor Place, North Bethesda, MD 20852	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Bijan Eghtedari	3370 Hidden Bay Drive, # 403 Aventura, FL 33180	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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 APR 27 2010
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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

Dated

04.26.2010



Signature of a member or authorized representative of a member

Ben Noveen

Typed or printed name of signee