L10000062941

(Red	questor's Name)	-
(Add	dress)	
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(City	y/State/Zip/Phone	= #)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
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COVER LETTER

Divis	sion of Corp	porations		
			ATION LLC	
BUSINESS FOR ADVANCED INNOVATION LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for tiling. Please return all correspondence concerning this matter to the following: MOHAMMAD H MAMUN Name of Person BUSINESS FOR ADVANCED INNOVATION LLC Firm/Company 3677 23rd Ave. South Suite - A108 Address LAKE WORTH, FL 33461 City/State and Zip Code MDMAMUN2000@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MOHAMMAD H MAMUN Name of Person 1786 200-4718 at (
The enclosed	Articles of z	Amendment and fee(s) are sub	mitted for filing.	
Please return a	all correspor	ndence concerning this matter	to the following:	
		MOHAMMAD H MAMUN	٧	
			Name of Person	
		BUSINESS FOR ADVA	NCED INNOVATION LLC	
			Firm/Company	
			Address	
		LAKE WORTH, FL 3346	51	
		_	L.COM	
		E-mail address: (to be used for future annual report notifi	cation)
For further inf	formation co	oncerning this matter, please ea	all:	
МОНАММА	D H MAMU	IN		
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 Fi.	ling 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:

TO:

Registration Section

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 Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L10000062941 .	y were filed on <u>06/11/2010</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		SER SER
	·	
		AH)
Enter new mailing address, if applicable:		
nter new mailing address, if applicable: <u>Aailing address MAY BE A POST OFFICE BOX</u>		5 5 5 5
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her		nter the name of t
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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 adde or removed from our records:

MGR = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	MASUD ZAMAN	4730 CRESTED BUTTE TRAIL ROCKFIELD, IL 61114	= Add
			☐ Remove
			Change
			□ Remove
			☐ Change
			Add
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ective date, if other than the da a effective date is listed, the date must be	te of filing: specific and cannot be prior	to date of filing or more than	(optional) 90 days after filing.) Pursuant to	o 605.03
te: If the date inserted in this block tument's effective date on the Depa	does not meet the applic	able statutory filing requir	ements, this date will not be	listed
·				
record specifies a delayed e The 90th day after the record	ffective date, but no I is filed.	et an effective time, a	t 12:01 a.m. on the e	arlier
SEPTEMBER 6TH	2018			
	11011	M		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00