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(Requ	uestor's Name)	
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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Cor	porations		
	4 INVESTMENTS, LLC		
SUBJECT:	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:	
	Nafis A Dewji		
		Name of Person	
	SANAYAN INVESTMEN	re submitted for filing. natter to the following: Name of Person TMENTS Firm/Company ke Drive Address . 33437 City/State and Zip Code o.com dress: (to be used for future annual report notification) ease call:	
		Name of Limited Liability Company and fee(s) are submitted for filing. terning this matter to the following: Dewji	
	9779 Coronado Lake Dri	ive	
		Address	
	Boynton Beach, FL 3343	37	
		·	····
	Nadiyadewji@yahoo.com		ication)
For further information of	concerning this matter, please c		
Nafis A Dewji		= = = = = = = = = = = = = = = = = = = =	
Name o	of Person		Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addre	Section	Registration Sec	
Division of C	Lorporations	Division of Cor	porations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Zip Code

SANAYAN 4 IN	VESTMENTS, LL			
	(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our records.) .iability Company)	
The Articles of Organization f		iability Company	were filed on 9/23/2010	and assigned
This amendment is submitted	to amend the follo	owing:		
A. If amending name, enter	the new name o	the limited liab	ility company here:	
The new name must be distinguisha	ble and contain the w	ords "Limited Liabil	ity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices a	ddress, if applic	able:		
(Principal office address MU	ST BE A STREE	T ADDRESS)		······································
				
Enter new mailing address, i	if applicable:			
(Mailing address MAY BE A	POST OFFICE	BOX)		
				<u>.</u>
B. If amending the registere agent and/or the new registe			iddress on our records, <u>enter th</u>	e name of the new registere
Name of New Regist	ered Agent:			
New Registered Offi	ce Address:			
			Enter Florida street address	

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.

City

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>	<u>Name</u>	Address	Type of Action
MGRM Dewji, Anver N	Dewji, Anver N	9779 Coronado Lake Drive	□Ađd
		Boynton Beach, FI 33437	
			□Change
MGRM	Dewji, Nafis A	9779 Coronado Lake Drive	■Add
		Boynton Beach, Fl 33437	
			□Change
			□Add
			□Remove
			□Change
			□Add
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Effective date, if other than the fame effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and ca block does not mee	annot be prior to et the applicab	date of filing or i	nore than 90 days a	ptional) after filing.) Pursuant this date will not b	to 605.0207 be listed as
record specifies a delayed effect d is filed.	ive date, but not an	n effective time	e, at 12:01 a.m.	on the earlier of	(b) The 90th da	y after the
June 4	······································	2020	_ •			
		-1 -				
	Signature of a men	mber 67 authori	zed representativ	> e of a member		
	Signature of a file	or or union	ara representativ	o or a memori		
Nafis A Dewji	•					

Filing Fee: \$25.00