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| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
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| (Business Entity Name)                  |
| (Document Number)                       |
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## **COVER LETTER**

Tallahassee, FL 32314

| TO: Registration S<br>Division of Co |  |   |  |
|--------------------------------------|--|---|--|
| SANAYAN<br>SUBJECT:                  | N 2 INVESTMENTS, LLC                         |   |  |
| SUBJECT:                             | Name of Lin                                  | nited Liability Company   |  |
| The enclosed Articles o              | f Amendment and fee(s) are sub               | omitted for filing.   |  |
| Please return all corresp            | ondence concerning this matter               | to the following:   |  |
|                                      | Nafis A Dewji                                |   |  |
|                                      | <del></del>                                  | Name of Person  |  |
|                                      | SANAYAN INVESTMEN                            | TS  |  |
|                                      | ·  | Firm/Company  | <del> </del>   |
|                                      | 9779 Coronado Lake Dr                        | ive   |  |
|                                      |  | Address   |  |
|                                      | Boynton Beach, FL 3343                       | 37  |  |
|                                      | · · · · · · · · · · · · · · · · · · ·        | City/State and Zip Code   |  |
|                                      | Nadiyadewji@yahoo.com                        | -   |  |
|                                      | E-mail address: (                            | to be used for future annual report no                              | tification)  |
| For further information              | concerning this matter, please c             | all:  |  |
| Nafis A Dewji                        |  | 561 5773893   |  |
| Name                                 | of Person                                    | Area Code Daytin  | ne 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 Addre                        |  | Street Address:   |  |
| Registration<br>Division of (        |  | Registration So<br>Division of Co                                   |  |
| P.O. Box 633                         |  | The Centre of   |  |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021,"" -9 Pii 4:44

| SANAYAN 2 INVESTMENTS, LLC   |   |                           |  |
|--|---|---------------------------|--|
| (Name of the Limited Liabili<br>(A Florida   | ity Company as it now appears on our records.) a Limited Liability Company) |                           |  |
| The Articles of Organization for this Limited Liability C  | Company were filed on 10/20/2010  | and assigned              |  |
| Florida document number L10000109590   | <del></del> -   |                           |  |
| This amendment is submitted to amend the following:  |   |                           |  |
| A. If amending name, enter the new name of the lim   | ited liability company here:  |                           |  |
| The new name must be distinguishable and contain the words "Lim  | nited Liability Company," the designation "LLC" or                          | the abbreviation "L.L.C." |  |
| Enter new principal offices address, if applicable:  |   |                           |  |
| (Principal office address MUST BE A STREET ADDI  | RESS)   |                           |  |
| 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 address here: | d office address on our records, <u>enter the</u>                           | name of the new regis     |  |
| Name of New Registered Agent:  |   |                           |  |
| New Registered Office Address:   | Enter Florida street address  |                           |  |
|  | , Florida   |                           |  |
|  | City  | Zip Code                  |  |
| New Registered Agent's Signature, if changing Registere  | d Agent:  |                           |  |
| hereby accept the appointment as registered agent  | and agree to act in this capacity. I furthe                                 | er agree to comply with   |  |

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

| Title       | <u>Name</u>     | Address                  | Type of Action |
|-------------|-----------------|--------------------------|----------------|
| MGRM        | Dewji, Anver N  | 9779 Coronado Lake Drive |                |
|             |                 | Boynton Beach, Fl 33437  | ■Remove        |
|             |                 |                          |                |
| MGRM        | Dewji, Yasmin A | 9779 Coronado Lake Drive | □Ađd           |
|             |                 | Boynton Beach, FI 33437  | <b>Rem</b> ove |
|             |                 |                          | Change         |
| MGRM        | Dewji, Nafis A  | 9779 Coronado Lake Drive | ■Add           |
|             |                 | Boynton Beach, Fl 33437  | □Remove        |
|             |                 |                          | Change         |
|             |                 |                          | \(\sigma\) Add |
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|   |   |   |                            |  |
| ffective date, if other than the an effective date is listed, the date mote: If the date inserted in this ocument's effective date on the | ust be specific and cannot be<br>block does not meet the ap | prior to date of filing opplicable statutory is | or more than 90 days after | onal)<br>filing.) Pursuant to 605.020<br>s date will not be listed a |
| record specifies a delayed effect is filed.   | ive date, but not an effecti                                | ve time, at 12:01 a.                            | m. on the earlier of: (t   | e) The 90th day after the  |
| June 4  | 2020  | ·   |                            |  |
|   | A-  |   |                            |  |
|   | XI/10   |   |                            |  |
| <u></u>   | Signature of a meraber or                                   | authorized represents                           | tive of a member           |  |

Filing Fee: \$25.00