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Office Use Only



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COVER LETTER

TO: Registration S Division of Co			
SANAYA! SUBJECT:	N 3 INVESTMENTS, LLC		
SUBJECT:	Name of Lin	ited Liability Company	
	f Amendment and fee(s) are sub	-	
Please return all corresp	ondence concerning this matter	to the following:	
	Nafis A Dewji		
		Name of Person	
	SANAYAN INVESTMEN	TS	
		Firm/Company	
	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 notification)	
For further information	concerning this matter, please c	all:	
Nafis A Dewji		561 5773893	
Name	of Person	at (
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee. Certificate of Stat Certified Copy (additional copy is enc	us &
<u>Mailing Addre</u> Registration		Street Address: Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2020 **** - 9 PH 4: 48

SANAYAN 3 INVESTMENTS, LLC (Name of the Limited Liabili	ity Company as it now appears on our records.)
(A Florida	ity Company as it now appears on our records.) a Limited Liability Company)
he Articles of Organization for this Limited Liability C	Company were filed on 10/20/2010 and assigned
lorida document number L10000109591	
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the lim	ited liability company here:
he 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	<u>RESS)</u>
Inter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	d office address on our records, enter the name of the new regi
gent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Medicas.	Enter Florida street address
New registered Office reduces.	Criter 1 sortial Street (May 633)
New Registered Office Fluidess.	

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Dewji, Anver N	9779 Coronado Lake Drive	
		Boynton Beach, Fl 33437	■Remove
			Change
MGRM	Dewji, Yasmin A	9779 Coronado Lake Drive	□Add
		Boynton Beach, Fl 33437	■Remove
			□Change
MGRM	Dewji, Nafis A	9779 Coronado Lake Drive	 ■ A d d
		Boynton Beach, Fl 33437	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

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Filing Fee: \$25.00