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'To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC Account Number : 120020000094 : (770)777-2091 Phone Fax Number : (770)220-1943

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NAKASH PROPERTIES LLC

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	کر	COVER LETTER	(((H14000062965		
TO: Registration Se Division of Cor					
NAK	ASH PROPE	RTIES LLC			
SUBJECT:		nited Liability Company	·····		
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please return all correspo	ndence concerning this matte	r to the following:			
	Karen Rodr				
	Maren Nour	Name of Person			
	Triad Profes	ssional Services	•		
		Firm/Company	<b>&gt;</b>		
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	• • • • •	Address			
	Alpharetta,				
		City/State and Zip Code			
	E-mail address:	(to be used for future annual report n	otification)		
For further information c	oncerning this matter, please	call:			
Karen Rodi	riquez	770 777.	2091		
	(Person	at ()	umo Telephono Number		
• • <b></b>			,		
Enclosed is a check for th	ne 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)		
	ING ADDRESS:		RIER ADDRESS:		
	ation Section in of Corporations	Registration Section Division of Corporations			
P.O. B	ox 6327 issee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SECRETARY DE STATE

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NAKASH PROPERTIES LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/14/2011 \_\_\_\_ and assigned Florida document number L11000044780

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida strees addr	<b>«</b> \$\$\$
	,, F	Norida 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

Page 1 of 3

. . .

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or <u>Authorized Member being added or removed from our records</u>:

MGR = Ma AMBR ≈ Au	nager thorized Member		
Title	Name	Address	Type of Action
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		Miami, FL 33131	E Remove
MGR	Rob Spiegelman	1400 Broadway, 15th Floo	r Add
	•	New York, NY 10018	Remove
MGR	Salem Mounayer	1400 Broadway, 15th Floo	)r ■ Add
		New York, NY 10018	CRemove
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		New York, NY 10018	🗖 Remove
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