

L11000087912

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

APR 20 2012

EXAMINER

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: THE MIDAS GROUP LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

AYSHE KADIR

Name of Person

A3 ENTERPRISES LLC

Firm/Company

217 W RIVERSIDE DR

Address

JUPITER, FL 33469

City/State and Zip Code

INFO@A3ENTERPRISES.COM

E-mail address: (to be used for future annual report notification)

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2012 APR 19 AM 8:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

AYSHE KADIR

Name of Person

at ( 561 )

427 7246

Area Code & Daytime 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 ADDRESS:**  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 3, 2012

AYSHE KADIR  
A3 ENTERPRISES LLC  
217 W RIVERSIDE DR  
JUPITER, FL 33469

SUBJECT: THE MIDAS GROUP LLC  
Ref. Number: L11000087912

FILED  
2012 APR 19 AM 8:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for THE MIDAS GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 412A00010849

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

THE MIDAS GROUP LLC

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

FILED  
2012 APR 19 AM 8:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/01/2011 and assigned  
Florida document number L11000087912.

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)**

217 W RIVERSIDE DR

JUPITER

FL 33469

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

217 W RIVERSIDE DR

JUPITER

FL 33469

**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:

217 W RIVERSIDE DR

*Enter Florida street address*

JUPITER

*City*

Florida

33469

*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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	AYSHE KADIR	SUITE 600, 4440 PGA BOULEVARD PALM BEACH GARDENS FL 33410	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	AYSHE KADIR	217 W RIVERSIDE DR JUPITER, FL 33469	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FILED  
 2012 APR 19 AM 8:49  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Dated 29TH MARCH

*Ayshe Kadir*  
 Signature of a member or authorized representative of a member  
*Ayshe Kadir*  
 Typed or printed name of signee