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D. BRUCE
OCT 13 2011
EXAMINER

COVER LETTER

TO: Reg	istration S ision of Co	ection rporations					
SUBJECT:		ВАН	HADIR LLC				
SODJECT.		Name of Limi	ted Liability Company				
The enclosed	l Articles of	f Amendment and fee(s) are sul	omitted for filing.				
Please return	all corresp	ondence concerning this matter	to the following:				
JAHIT H. KAVURT			JAHIT H. KAVURT				
			Name of Person				
KAVI		KAVL	JRT LAW OFFICES, P.A.				
			Firm/Company				
636		636	6 WEST YALE STREET		<u> </u>		
			Address		P	3	 :
ORLANDO EL 328		ORLANDO, FL 32804		ASS	1007 12 PH 120 1		
	City/State and Zip Code KAVURTLAW@AOL.COM				E O	~0	i [-
					<u> </u>	三 三	Į
		E-mail address: (to be used for future annual report notific	ation)	≥≤	QJ QJ	"Mana
For further in	nformation -	concerning this matter, please of	call:), .	Ο,	
	JAH	IT H. KAVURT	at (_407_)4	72-0621			
	Name	of Person	Area Code & Daytime	Telephone Number			
Enclosed is a	check for	the following amount:					
√ \$25.00 Fi	iling Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate Certified C (additional	of Status & Copy)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section on of Corporations 30x 6327	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cen	tions			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BA	HADIR LLC			
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appea imited Liability Company)	ers on our records.)		
The Articles of Organization for this Limited Liability Co	ompany were filed on	09/27/2011	and assigned	
Florida document numberL11000110500				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limit</u>	ted liability company he	<u>re</u> :		
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Comp	any," the designation "	LLC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>		Ţŗ.	
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>			HASSEE, FLORID	
B. If amending the registered agent and/or registered agent and/or the new registered office address Name of New Registered Agent:		our records, <u>enter</u>	the name of the nev	
New Registered Office Address:	Enter Florida street address			
		, Florida		
	City		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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Title** Name Address **Type of Action** MGR ULUCAY, SAVAS 777 NORTH ASHLEY DR. #1805 ☐ Add TAMPA, FL 33602 ✓ Remove ☐ Add Remove ☐ Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCTOBER 11 2011 Signature of a member or authorized representative of a member KUTLU A. BAHADIR Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00