## LIROUD 47281

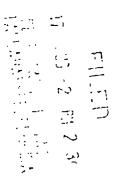
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D. SCOTT AUG 4 2017

## COVER ISETTER

TO: Registration Section **Division of Corporations** The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Nishad Khan PL Name of Person Nishad Khan PL Firm/Company 617 E. Colonial Drive Address Orlando, FL 32803 City/State and Zip Code Yvette@EightKInvestments.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Eight K Investments Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section

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

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOWORDI CONTES & Row Enterprises L.L.C.

(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 Florida document number L12000047281	were filed on 04/06/2012 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ry 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)		
	7	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		
registered agent and/or the new registered office address nere	· ~	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address Florida	
	. Florida City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of	performance of my duties, and I am familiar with and covided for in Chapter 605, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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
AMBR	SHERMAN OAKS LLC	600 LAKE HARBOR CR	
		ORLANDO, FL 32809	Remove
			Change
AMBR KEITH MAWAR	KEITH MAWARDI	1026 West Central Boulevard	Add
		Orlando, FL 32805	☐ Remove
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a roco	d specifies a delayed effective date, but not an effective time, at 12:01 a.m Oth day after the record is filed.	o. on the earlier o
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THE 9	() 215t	
THE 9	July 3/5t 2017	
THE 9	July 31 st 2017.	
The 9	Signature of a member or authorized representative of a member	· · · · · · · · · · · · · · · · · · ·

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Filing Fee: \$25.00