

L12 0000066297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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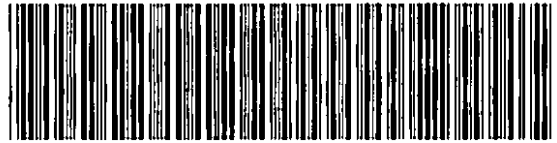
(Business Entity Name)

(Document Number)

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JUN 20 2021  
ALBRITTON

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: MR AND BZH 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:

Mohamed Hashim

Name of Person

MR AND BZH LLC

Firm/Company

8430 NW 4th Street

Address

Pembroke Pines, FL 33024

City/State and Zip Code

bzhashim2@gmail.com

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

For further information concerning this matter, please call:

Mohamed Hashim

352

973-2715

at ( )

Name of Person

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 Address:**

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

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

MR AND BZH 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 May 16, 2012 and assigned  
Florida document number L12000066297

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 contain 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)**

1501 SW 131st Way

306P

Pembroke Pines, FL, USA, 33027

**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:

1501 SW 131st Way, 306P

*Enter Florida street address*

Pembroke Pines

*City*

Florida 33027

*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**

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>	<u>Type of Action</u>
MGRM	Mohamed Hashim	ADDRESS CHANGE ONLY	<input type="checkbox"/> Add
		1501 SW 131st Way 306P, Pembroke Pines FL, 33027	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGRM	Bibi Hashim	ADDRESS CHANGE ONLY	<input type="checkbox"/> Add
		1501 SW 131st Way 306P, Pembroke Pines FL, 33027	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Non-Econ	Shaun Arif Hashim	301 Kingsway Place, Milton, ON, L9T 4C8	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

↑  
NON-ECONOMIC  
MEMBER

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

605.0401(4) A person may become a member without acquiring a transferable interest and without making or being obligated to make a contribution to the limited liability company.

Shaun Arif Hashim currently residing at 301 Kingsway Place, Milton, ON, L9T 4C8 is being added as a Non-Economic, Non-Contributing Member of this LLC.

605.0709(3) If a dissolved limited liability company has no members, the legal representative of the last person to have been a member may wind up the activities and affairs of the company. If the legal representative does so, the person has the powers of a sole manager under s. 605.0407(3) and is deemed to be a manager for the purposes of s. 605.0304(1).

Shaun Arif Hashim currently residing at 301 Kingsway Place, Milton, ON, L9T 4C8 is the Legal Representative for the Members of this LLC.


**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 12 , 2021

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Mohamed Hashim

\_\_\_\_\_  
Typed or printed name of signee