

L12000118353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

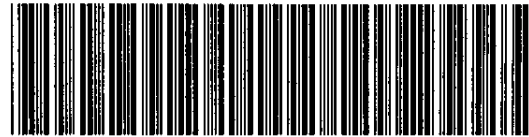
(Business Entity Name)

(Document Number)

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SEC. OF STATE
DIVISION OF CORPORATIONS
13 JAN 18 PM 12:28

JAN 22 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ABSOLUTE FREEDOM 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:

IMRAN RAHMAN

Name of Person

ABSOLUTE FREEDOM LLC

Firm/Company

6910 MONARCH PARK DR

Address

APOLLO BEACH FL 33572

City/State and Zip Code

IMRAN@IMRANRAHMAN.COM

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

For further information concerning this matter, please call:

IMRAN RAHMAN

Name of Person

at (813) 263 - 6027

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

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

ABSOLUTE FREEDOM 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 09/17/2012 and assigned
Florida document number L12000118353

This amendment is submitted to amend the following:

N/A 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)

6910 MONARCH PARK DR
APOLLO BEACH
FL 33572

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6910 MONARCH PARK DR
APOLLO BEACH
FL 33572

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:

IMRAN RAHMAN

New Registered Office Address:

6910 MONARCH PARK DR

Enter Florida street address

APOLLO BEACH, Florida 33572
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.

Imran Rahman
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	IMRAN RAHMAN	6910 MONARCH PARK DR.	<input checked="" type="checkbox"/> Add (update address)
		APOLLO BEACH	<input type="checkbox"/> Remove
		FL 33572	
MGRM	ABIDA RAHMAN	6910 MONARCH PARK DR.	<input checked="" type="checkbox"/> Add
		APOLLO BEACH	<input type="checkbox"/> Remove
		FL 33572	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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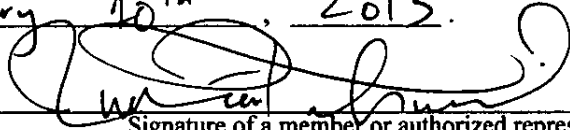
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CLERK OF DISTRICT COURT
JULIA A. HARRIS

The following should be amended in total
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

- * Update principal address
- * Update mailing address
- * Update R.A. address
- * Update I.R. MGRM address
- * Add A.R. MGRM name & address

when done.
(as shared in
the pages
before ...
Thanks!!!)

Dated January 10th, 2013.



Signature of a member or authorized representative of a member

IMRAN RAHMAN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JAN 18 PM 12:28