

L13 000065402

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

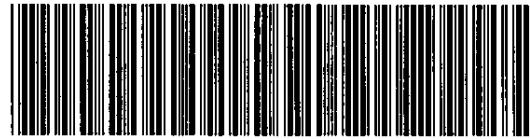
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100252907671

11/04/13--01003--003 \*\*25.00

NOV - 5 2013  
T CLINE

FILED  
2013 NOV - 4 PM 12:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **AS & ZS ENTERPRISE 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:

**MOHAMMED HANIF**

Name of Person

**AS & ZS ENTERPRISE LLC**

Firm/Company

**306 S 6TH AVENUE**

Address

**WAUCHULA, FL 33873**

City/State and Zip Code

**SARMIN 86 @ VERIZON, AL**

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

For further information concerning this matter, please call:

**MOHAMMED HANIF**

Name of Person

at **727 565-7358**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 NOV -14 PM12:51

FILED

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

**AS & ZS ENTERPRISE 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 5-3-13 and assigned  
Florida document number P13000065402.

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)**

**Enter new mailing address, if applicable:**

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

FILED  
2013 NOV -4 PM 12:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

MOHAMMED HANIF

New Registered Office Address:

306 S. 6TH AVE

Enter Florida street address

WAUCHULA

City

Florida 33873

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.*

X Mohammed A. Hanif  
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	SUJANA AFRIN	442 ARCH RIDGE LOOP	<input type="checkbox"/> Add
		SEFFNER, FL 33584	<input checked="" type="checkbox"/> Remove
MGRM	HASINA BEGUM	442 ARCH RIDGE LOOP	<input type="checkbox"/> Add
		SEFFNER, FL 33584	<input checked="" type="checkbox"/> Remove
MGRM	MOHAMMED HANIF	306 S 6TH AVENUE	<input checked="" type="checkbox"/> Add
		WAUCHULA, FL 33873	<input type="checkbox"/> Remove
MGRM	FAHMIDA HALEN	306 S 6TH AVENUE	<input checked="" type="checkbox"/> Add
		WAUCHULA, FL 33873	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 NOV -4 PM 12:51

FILED

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

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

Dated OCTOBER 31, 2013

X Mohammed A. Hanif

Signature of a member or authorized representative of a member

MOHAMMED HANIF

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 NOV -4 PM 12:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED