

L130000081469

Division of Corporations

Florida Department of State  
Division of Corporations  
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2015 MAY - 8 A 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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15 MAY - 8 AM 10:00

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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SAWSAN1, LLC

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu Corporate Filing Menu

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(X)

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

SAWSANI, 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 06/05/2013 and assigned  
Florida document number L13000081469

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

Enter Florida street address

City, Florida 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

Title	Name	Address	Type of Action
MGR	Mohamed Sameh Mostafa <del>Bayoumi Hassanein</del>	c/o Gary Siberman, P.A. <del>2665 S. Bayshore Drive, #725</del> Coconut Grove, FL 33133	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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(b) The 90th day after the record is filed.

Dated May 5 2015  
Ahmed Sherin Hassanain  
 Signature of a member or authorized representative of a member  
 Ahmed Sherin Hassanain  
 Typed or printed name of signer

Page 3 of 3  
Filing Fee: \$25.00

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