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## **COVER LETTER**

TO:	Registration Division of C				
SHRIF	G. 600	D LUCK PROPER	TIES, LLC		
SUBJE		Name of Limited	Liability Company		
The encl	losed Articles	of Amendment and fee(s) are submit	ted for filing.		
Please re	eturn all corres	spondence concerning this matter to t	the following:		
		ZAHABIA A	ILUMINIUMWA	LA	
			Name of Person		
		GOOD LUCK	PROPERTIES,	LLC	
			Firm/Company		
		8419 FOREST	HILLS DR., A	PT 206	
			Address		
		CORAL SPRIM	City/State and Zip Code  5 @ g mail · Come used for future annual report noti	65	
			City/State and Zip Code	<del></del>	
		murtuza2	5@gmail.com	<b>\</b>	
		E-mail address: (to b	e used for fature annual report noti	fication)	
For furth	er information	n concerning this matter, please call:			
MUR	TUZA	ALUMINIUMWALA	954 826	5278	
	Name	e of Person	Area Code Daytim	e Telephone Number	
		the following amount:			
\$25.0	00 Filing Fee	S30.00 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 Addr		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations			
	P.O. Box 63		The Centre of T		
•	Tallahassee,	, FL 32314	2415 N. Monroe	Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 OCT -1 AM 5: 48

(Name of the Limit	ed Liability Comp (A Florida Limited	pany as it i Liability	now ap	p <b>ears on our</b> ny)	records.) (R	TARY OF SIMI
				6000 L	UCK PRO	PERTIES, LLC
The Articles of Organization for this Limited Li		y were i	iled on			and assigned
Florida document number <u>L 13 00013 6</u>	632					
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of	the limited lia	bility co	mpan	y here:		
The new name must be distinguishable and contain the w	ords "Limited Lial	bility Con	ipany," t	he designation	n "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	able:					
(Principal office address MUST BE A STREE	T ADDRESS)			· <del></del>	<del></del>	
Enter new mailing address, if applicable:						<del></del>
(Mailing address MAY BE A POST OFFICE I	BOX)					
				_	_	
B. If amending the registered agent and/or reagent and/or the new registered office addres.		addres	s on ou	r records,	enter the na	me of the new registered
Name of New Registered Agent:	ZAHAB	AL	AL	MIHIM	JMWALA	·
New Registered Office Address:	8419	FOR	EST	HILLS	DRIVE	APT 206
			Enter	Florida street	address	
	CORAL	SP	RIN	ሪ ડ	. Florida	33065
		Cit	y			Zip Code
New Registered Agent's Signature, if changing R	egistered Agent	<u>::</u>				
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this c	r and complete tered agent as egistered office	e perfor provide	mance ed for i	of my dut n Chapter	ies, and I am 605, F.S. Or	familiar with and t, if this document is

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>Addr</u>	<u>288</u>	Type of Action
MGR	MURTUZA A	LUMINIUMWALI	A -	□Add
		8419 FORE	ST HILLS DR., APT206	Remove
			PRINGS, FL 33065	
				□Change
MGR	ZAHABIA ALUN	IINIUMWALA	8419 FOREST HILLS DR CORAL SPRINGS, FL 330	APT 206
			CORAL SPRINGS, FL 330	65
				□ Remove
				□ Add
				□Remove
				□Change
				□Add
				□Remove
				□ Change
				□ Add
				□Remove
				□ Change
				🗆 Add
				□Remove
				Change

11 auro	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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f an effe Note: 1	ye date, if other than the date of filing:
record d is file	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 d.
Dated _	SEPTEMBER 27 2021
	AL AC
	Signature of a member or authorized representative of a member
	MURTUZA ALUMINIUMWALA
	Typed or printed name of signee

Filing Fee: \$25.00