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(City/State/Zip/Phone #)	08/21/2001022008 **25.00
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COVER LETTER

TO: Registration Section Division of Corporations

AF Florida, LLC SUBJECT:

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:

Aram Benhamu Name of Person AF Florida, LLC Firm/Company 8531 Via Romana, Unit 2 Address Boca Raton, FL 33496 City/State and Zip Code faracheahron@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Aram Benhamu 954 803-6887 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 & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

<u>Street Address:</u> 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

1930 / R. 1 21 PH 7: 18

AF	Florida,	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 $\frac{11}{2}$	(12/2013 and assigned
Florida document number L13000158588	

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 "LLC."

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)

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:	Aram Benhamu	
New Registered Office Address:	8531 Via Romana, #2	
	Enter Florida street address	
	Boca Raton	Florida <u>33496</u>
	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 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:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address 2021 N 24 111 7:48	} <u>Type of Action</u>
Mgr	Aram Benhamu	8531 Via Romana, #2	🖬 Add
		Boca Raton, FL 33496	_
			□Change
MgrM	Ahron Farache	8531 Via Romana, 71-2	🗆 Add
		Boca Raton, FL 33496	
			□Change
			🗆 Add
			🗆 Remove
			🗆 Change
<u> </u>			🗆 Add
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			Change
			🗆 Add
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			□ Change

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

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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	Ayst 14	
	93 inste	
	Signature of a member or authorized representative of a member	
_	ARAM BEN HAMU	_

Filing Fee: \$25.00