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T. BROWN

COVER LETTER

Division of Cor			
_{SUBJECT:} Tejar	ni Holdings, LL	.C	
SUBJECT:	-	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Sumayya Te	ejani	
		Name of Person	
		Firm/Company	
	793 Lakewo	rth Circle	
		Address	
	Lake Mary,	Florida 32746	
		City/State and Zip Code	
	sumayya.tejania(E-mail address: (obe used for future annual report notifi	ication)
For further information e	oncerning this matter, please c	all:	
Sumayya T	ejani	_{at} 516, 655-59	922
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

All Signature Programmes Se

Tejani Holdings 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 January 13, 2014 and assigned.

Florida document number L14000006696

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 "LLC"

Enter new principal office 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, 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

Florida

To 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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address Type of Action
MGR	Ashikali A. Tejani	793 Lakeworth Circle _ ■ Add
		Lake Mary, Florida 32746 Remove
MGR	Aliakber A. Tejani	793 Lakeworth Circle Add
		Lake Mary, Florida 32746
MGR	Tahira A. Tejani	793 Lakeworth Circle Add
		Lake Mary, Florida 32746
MGR	Sayyeda A. Tejani	793 Lakeworth Circle Add
		Lake Mary, Florida 32746 Remove
MGR	Sukaina A. Tejani	793 Lakeworth Circle _■ Add
		Lake Mary, Florida 32746
		Remove

D. If ame	ending any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary.)
_		
_		
-		
-		
-		
(The effe	tive date, if other than the date of filing fective date must be specific, cannot be prior to dat the this document is filed by the Florida Departmen	te of receipt or filed date and cannot be more than 90 days after
Dated	February 28	2014
Daled		m.
	· • • • • • • • • • • • • • • • • • • •	nember or authorized representative of a member
	Sumayya Tejani	
		Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00