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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

4423 RAINBOW AVE LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: SETH 08/23/22	UCC 1 or 3 File
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Walk-In Will Pick Up	Courier

COVER LETTER

то:	Registration So Division of Cor			
63 I 3 73 I	ı. er	4423 RAIN	BOW AVE LLC	
SOBJ	ECT:	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			Randy J. Nathan, Esq	
			Name of Person	
		Fra	nk, Weinberg & Black, P.I	
		-	Firm/Company	
			7805 SW 6th Court	
			Address	
			Plantation, FL 33324	
			City/State and Zip Code	
		E mail addraws t	rnathan @fwblaw.net to be used for future annual report notific	oution)
For fu	rther information c	oncerning this matter, please ca	·	cations
	Randy J. N	athan, Esq	954 474-8000 x	113
	Name o	f Person	at ()	Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	5.00 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

TO:

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4423 RAINBOW AVE LLC

FILED

2022 AUG 23 AM 9: 48

SEULLIMIN DE BERTE DITALLAHASSEERFL

(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 $\underline{02/17/2014}$ _____ and assigned Florida document number 1.14000026951 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)

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:

New Registered Office Address: Enter Florida street address	-	City	, Florida
	New Registered Office Address:	Enter Florida street aa	ldress

New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

<u>Title</u>	Name	Address	Type of Action
AMBR	SYED S. ALI	19475 N Coquina Way	
		Weston, FL 33332	■ Remove
			□ Change
AMBR	AMNA IMRAN	19475 N Coquina Way	
		Weston, FL 33332	■ Remove
			Change
AMBR	AMBREEN IMRAN	19475 N Coquina Way	□ Add
		Weston, FL 33332	Remove
			☐ Change
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	Signature of a	member authoriz	ed representative	of a member		
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Page 3 of 3

Filing Fee: \$25.00