# 14000037908

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B. BOSTICK

APR 1 4 2014

**EXAMINER** 

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

ALWAHA GROUP 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:

# YVETTE RASHID

Name of Person

UNIVERSAL ACCOUNTING & FINANCIAL SERVICES INC.

Firm/Company

2787 E OAKLAND PARK BLVD STE 204

Address

# FORT LAUDERDALE, FL 33306

City/State and Zip Code

### YVETTE@UNIVERSALACCOUNTINGFINANCIAL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

# YVETTE RASHID

<sub>.</sub>954 728-8982

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALWAHA GROUP LLC.	
( <u>Name of the Limited Liability Company as it now app</u> (A Florida Limited Liability Company	ears on our records.) y)
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L14000037908</u> .	03/06/2014 and assigned
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," t	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	2 2
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	U )
	; W
	-
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, enter the name of the ne
registered agent and/or the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:  Enter F	Florida street address
City	, Florida

#### 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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Title Name **Address** Type of Action ADEL ELBAEE MGR 2787 E OAKLAND PARK BLVD STE 204 **■** Add FT LAUDERDALE, FL 33306 ☐ Remove ADEL ELBAGE MGR 2787 E OAKLAND PARK BLVD STE 204 □ Add FT LAUDERDALE, FL 33306 ■ Remove □ Add ≘ ⊒□ Remove, ¢Л \_ ☐ Remove □ Add ☐ Add □ Remove

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Filing Fee: \$25.00