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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

BANGLA FRESH LLC

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:

SHARIFA MINO

Name of Person

BANGLA FRESH LLC

Firm/Company

1333 E ORANGE AVENUE

Address

EUSTIS FL 32726

City/State and Zip Code

syedh101@yahoo.com

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

For further information concerning this matter, please call:

SHARIFA MINO

...352、

602-7360

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

BANGLA FRESH LLC (Name of the Limi	ted Liability Compan (A Florida Limited L	y as it now appears on our records.) iability Company)			
The Articles of Organization for this Limited L Florida document number <u>L14000066642</u>	iability Company	were filed on 4/24/2014		and ass	igned
This amendment is submitted to amend the foll	lowing:				
A. If amending name, enter the new name of	of the limited liabi	lity company here:			
N/A					
The new name must be distinguishable and end with the	words "Limited Liabi	lity Company." the designation "LLC"	or the al	bbreviation "I	L.C."
Enter new principal offices address, if applie	cable:	N/A			
(Principal office address MUST BE A STREE					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>: BOX)</u>	N/A			
B. If amending the registered agent and registered agent and/or the new registered of			<u>enter</u>	the name	of the new
Name of New Registered Agent:	SHARIFA N		1 1 1		
New Registered Office Address:	1333 E OR	ANGE AVENUE	Ş		* mack
New Registered Office Address.		Enter Florida street address		<u> </u>	i santa
	EUSTIS	. Flor	ida 32	726 🚉	- 1 * 7
		City		Zip Code	- 14.
New Registered Agent's Signature, if changing	Registered Agent:		<u> </u>	T. (46)	•••
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg	per and complete	performance of my duties, and	l I am j	familiar wi	th and

If Changing Registered Agent, Signature of New Registered Agent

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 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	

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SYED ISLAM	2205 CERBERUS DRIV	/E □ Add
		APOPKA, FL 32712	■ Remove
			□ Remove
			□ Remove
		C.	Add
			Remove
			Add , →
):	Remove
-			□ Add
			□ Remove
		<u></u>	

If amending any other information, ente		,
-		
Effective date, if other than the date of f (The effective date must be specific, cannot be prior the date this document is filed by the Florida Depart	o date of receipt or filed date and cannot	(optional) t be more than 90 days after
Dated June 01	2014	
Jated		
	grifa Mins	
SHARIFA MINO	of a grember or authorized representative	ve of a member
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

613 KY 51 KIIL 91