

L140000 86639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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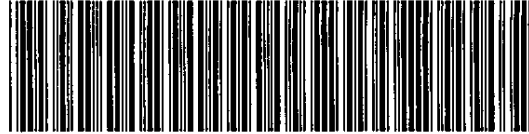
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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JUN 22 2016



# Davis Basta Law Firm, P.A.

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Palm Harbor, FL 34684  
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June 15, 2016

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

Re: St. George and St. Kara's Enterprises LLC

Dear Sir or Madam:

Enclosed for filing is the Articles of Amendment to Articles of Organization for St. George and St. Kara's Enterprises LLC, along with a check in the amount of \$25.00 for the filing fee.

Feel free to contact us should you have any questions or need additional information.  
Thank you.

Respectfully submitted,

Beejal Thakore

BT/mk  
Enclosures

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ST. GEORGE AND ST. KARA'S ENTERPRISES 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:

ATALLA AWAD

Name of Person

C/O DAVIS BASTA LAW FIRM, P.A.

Firm/Company

31111 U.S. 19 NORTH

Address

PALM HARBOR, FL 34684

City/State and Zip Code

BTHAKORE@DAVISBASTALAW.COM

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

For further information concerning this matter, please call:

ATALLA AWAD

727 992-0663  
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 &  
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

## Page 1 of 3

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	HOSNI S. GHALI, SR.	5545 ULMERTON ROAD	<input type="checkbox"/> Add
		CLEARWATER, FL 33760	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 6-14-2016, \_\_\_\_\_

 Signature

Signature of a member or authorized representative of a member

Awad, Atella

Typed or printed name of signee