

L14 000 171752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

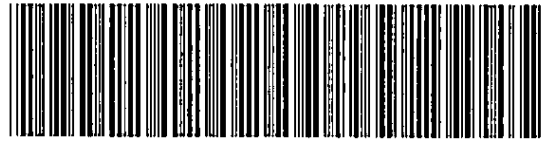
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21 APR 12 AM 11:47

CLERK OF COURT  
CLERK OF COURT

THOMAS F. WILLIAMS  
& ASSOCIATES

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ATTORNEYS AT LAW

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21 McGrath Highway • Suite 501 • Quincy, MA 02169  
tel 617-847-4200 • *facsimile* 617-328-8504  
[www.lawofficetwilliams.com](http://www.lawofficetwilliams.com)

April 7, 2021

Florida Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Basami, LLC  
Our File No. 21-089

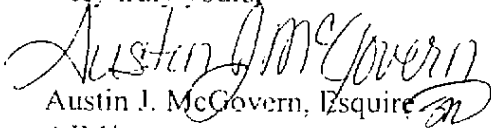
Dear Sir/Madam:

Enclosed herewith please find a Cover Letter, Articles of Amendment and a check in the amount of \$25.00.

Kindly file said Articles of Amendment in your usual manner.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

  
Austin J. McGovern, Esquire

AJM/smr

Enclosures

Cc: Mirna W. Habib

Joseph L. Lindsay, Esquire

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BASAMI, 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:

Mirna W. Habib

\_\_\_\_\_  
Name of Person

Basami, LLC

\_\_\_\_\_  
Firm/Company

292 Thompson Street

\_\_\_\_\_  
Address

Halifax, MA 02338

\_\_\_\_\_  
City/State and Zip Code

M.ISSA11@comcast.net

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

For further information concerning this matter, please call:

Mirna W. Habib

\_\_\_\_\_  
Name of Person

at ( 949 ) 735-3413

\_\_\_\_\_  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

DIVISION OF CORPORATIONS  
21 APR 12 AM 11:47

BASAMI, 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 11/04/2014 and assigned  
Florida document number L14000171752.

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:

292 Thompson Street, Halifax, MA 02338

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

292 Thompson Street, Halifax, MA 02338

(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

City

Zip 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 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>
MGR	Mirna W. Habib	292 Thompson Street	<input checked="" type="checkbox"/> Add
		Halifax, MA 02338	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Bassil W. Habib	2911 East Melrose Street	<input checked="" type="checkbox"/> Add
		Gilbert, AZ 85297	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Marcelle Zaher	5980 Amherst Drive, Apt. D-104	<input type="checkbox"/> Add
		Naples, FL 34112	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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DIVISION OF CORPORATIONS

21 APR 12 AM 11:47

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

STATE OF NEW YORK  
DIVISION OF CORPORATIONS

21 APR 12 AM 11:47

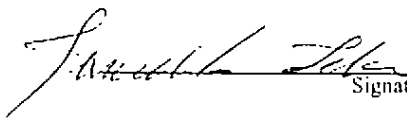
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated April 2, 2021



Signature of a member or authorized representative of a member

Marcelle Zaher

/ Mirna W. Habib

Typed or printed name of signee

Filing Fee: \$25.00