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Division of Corporations

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: (850)617-6383

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Account Name : PYNE LAW GROUP Account Number : I20110000059 Phone : (850)215-9090 Fax Number : (850)215-9045

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

mail Address: [aurapyce @ pyrelawgrays.com

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COVER LETTER

	egistration Selvision of Cor			
CHOICT	AMANAH			
SUBJEAT 1	·		ited Liability Company	
The enclose	ed Anicles of	Amendment and fee(s) are sub	unitted for filing.	
		ondence concerning this matter	-	
		LAURA C PYNE, ESQ.		
			Name of Person	····
		PYNE LAW GROUP, P.A	٨.	
			Firm/Company	
		2309 FRANKFORD AVE	NUE	
			Address	
		PANAMA CITY, FL 3240)5	
			City/State and Zip Code	
		E-mail addiess: (WGROUP.COM to be used for future annual report notif	ication)
For further	information c	oncerning this matter, please c		
LAURA C	. PYNE		850 215-9090	
Name of Person		at ()	: Telephone Number	
Enclosed is	a check for th	ne following amount:		
≣ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy taddinonal copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Re Di P.	ailing Addressegistration Sivision of CO, Box 632	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

07/07/2025 14:26

From: 18502159045

Pyne Law Group, P.A. Web

Page: 3/5

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

OF FETARY OF STATE

2025 JUL -7 PM 4: 15

AMANAH LLC		LAMASSET STATE
(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our recorded Liability Company)	<u>(s.)</u>
The Articles of Organization for this Limited Liability Compa	ny were filed on 12/11/2014	and assigned
Fiorida document number L14000189275		
his amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability 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)	***	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>enter</u>	the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	\
Manager and the second	, Flo	orida
	Ciù.	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.

07/07/2025 14:26 From:1

From: 18502159045

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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
MGR	Mughis Chaudhry	19211 Panama City Beach Pkwy, #108	🗆 A đ đ
		Panama City Beach, fl 32413	===
			□ Change
		-	⊔Add
			□Remove
			□Change
			□Add
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(If an effe Note:	ve date, if other than the active date is listed, the date mus if the date inserted in this blant's effective date on the Do	be specific and car ock does not mee	nnot be prior to date t the applicable s			.) Pursuant to 605	
If the record record is file	I specifies a delayed effectived.	date, but not an	effective time, as	12:01 a.m. on the	earlier of: (b) TI	ie 90th day afte	r the
Dated _	July 7		2025 0. R				

LAVRA- COUNTS PONE

Typed or printed name of signee

Filing Fee: \$25.00