



400335126394

17 19/19-- 19 ------- *+25.0a

SULKER OCT 29 2019

COVER LETTER

Division of Cor	рогацовѕ		
SUBJECT:	ALIKA AHIL LLO	0	
JOINECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	IBRAHII	M, MUHAMMAD JUNAID	
		Name of Person	
		Firm/Company	
		2505 US 231	
		Address	
		Panama City, FL 32405	
	-	City/State and Zip Code faribabyhardt64@yahoo.com	
	E-mail address: (to be used for future annual report noti-	fication)
For further information of	oncerning this matter, please ca	all:	
IBRAHIM, MUHAI		at (<u>\$50</u>) <u>274-4</u> Area Code Daytim	507
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne 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:

TO:

Registration Section

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

ALIKA AHIL LLC	
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.) offity Company)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L15000125946</u> .	ere filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	y company here:
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "L.L.C." 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)	NO BELLEVIA
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our records, enter the name of the new
Name of New Registered Agent:	0. 0.0000 0.000 0.
New Registered Office Address:	
	Enter Florida street address
	_ , 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Type of Action
MGR	ZAMAN KHAN, MUHAMMAD AAMER	2505 US 231	
			■ Remove
			Change
		-	
			☐ Remove
			□ Change
			Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			□ Add
			□ Remove
			□ Change
			□ Add
			☐ Remove
			☐ Change

<i>D.</i> 11 amen	unig any other	information, enter	change(s) here	. men aaam	mai sneers, y n	ecessus y, y	
						-,,	<u> </u>
				· · · · · ·	·		
	•						
			 				
	 		_	 			
							_
							
_		<u> </u>				7 - P - B - T-M-1-M-1	
				·			
_			~ <u></u>			 	
_							
	- ·		· · · · · · · · · · · · · · · · · · ·				
							
	-						
D D.M							
Note: 11	the date inserted	than the date of fili e date must be specific a in this block does not on the Department of	meet the applicate	to date of filing or mable statutory filing	ore than 90 days a g requirements.	otional) fter filing.) Pursuant to this date will not be	605.0207 (3)(listed as the
		delayed effective the record is filed		t an effective t	ime, at 12:0	1 a.m. on the ea	arlier of:
Dated _	October 7		2019				
		1 h					
		Signature of	a member or autho	rized representative	of a member		•
		IBRAHIM, MUHA	MMAD JUNAI	D			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00