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| Special Instructions to | Filing Officer:    |             |
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## **COVER LETTER**

|               | gistration Sec<br>ision of Corp |  |   |                                       |                 |        |
|---------------|---------------------------------|--|---|---------------------------------------|-----------------|--------|
| SUBJECT:      |                                 | ENTERISE, LLC.                           |   |                                       |                 |        |
| SUBJECT.      |                                 | Name of Limited Liabili                  | ty Company  |                                       |                 |        |
| The enclosed  | d Articles of A                 | mendment and fee(s) are submitted for    | filing.   |                                       |                 |        |
| Please return | all correspor                   | dence concerning this matter to the foll | owing:  |                                       |                 |        |
|               |                                 | HAMID BEKKACH                            |   |                                       |                 |        |
|               |                                 | Nar                                      | ne of Person  | ···                                   | -               |        |
|               |                                 | BEKKACH ENTERISE, LLC.                   |   |                                       |                 |        |
|               |                                 | Fir                                      | m/Company   |                                       | -               |        |
|               |                                 | 5343 W IRLO BRONSON MEMOR                | RIAL HWY  |                                       | 三名で             |        |
|               |                                 |  | Address   | · · · · ·                             | AR              | $\neg$ |
|               |                                 | KISSIMMEE, FL 34746                      |   |                                       | 20              | H 150  |
|               |                                 | •  | ate and Zip Code  |                                       | in.             | J      |
|               |                                 | jaybekkach@hotmail.com                   | for future annual report notificati                         | · · · · · · · · · · · · · · · · · · · | FLOR            | 1      |
| For further i | information co                  | oncerning this matter, please call:      | for future annual report notificati                         | ion)                                  | \$1FR 6         | -      |
| HAMID B       | EKKACH                          | a  | 407 507-2765  |                                       |                 |        |
|               | Name of                         |  |   | lephone Number                        | r               |        |
| Enclosed is   | a check for th                  | e following amount:                      |   |                                       |                 |        |
| \$25.00       | Filing Fee                      | Certificate of Status Co                 | 5.00 Filing Fee & ertified Copy dditional copy is enclosed) | Certified                             | ite of Status & |        |

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

| BEKKACH ENTERISE, LLC.   |                                       |   |                                 |
|--|---------------------------------------|---|---------------------------------|
| (Name of the Limite  | d Liability Comp<br>A Florida Limited | any as it now appears on our record<br>Liability Company) | <u>s.</u> )                     |
| The Articles of Organization for this Limited List Florida document number £16000069014  | ability Compan                        | y were filed on 04/07/2016                                | and assigned                    |
| This amendment is submitted to amend the follo   | wing:                                 |   |                                 |
| A. If amending name, enter the new name of   | the limited lia                       | bility company here:                                      |                                 |
| BEKKACH ENTERPRISE, LLC.   |                                       |   |                                 |
| The new name must be distinguishable and contain the wa  | ords "Limited Liab                    | oility Company," the designation "LLC                     | " or the abbreviation," L.L.C." |
| Enter new principal offices address, if applica  | able:                                 | N/A   | - <del> </del>                  |
| (Principal office address MUST BE A STREE  | T ADDRESS)                            |   | -, -50 _,                       |
| Enter new mailing address, if applicable:  |                                       | N/A   | 0 PH 2:                         |
| (Mailing address MAY BE A POST OFFICE )  | BOX)                                  |   | हात क                           |
| B. If amending the registered agent and/registered agent and/or the new registered of  Name of New Registered Agent:  New Registered Office Address: |                                       |   |                                 |
|  |                                       | , FI  | orida                           |
|  |                                       | City  | Zin 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

| MGR = Manager AMBR = Authorized Member |          |         |                  |
|--|----------|---------|------------------|
| <u> Title</u>                          | Name     | Address | Type of Action   |
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| ective date, if other than the date on effective date is listed, the date must be specter. If the date inserted in this block does cument's effective date on the Department. | eific and cannot be prior to date or some state of the st | of filing or more than 90 da<br>stutory filing requiremen  | ( <b>optional)</b><br>ys after filing.) Pursuant to 605,<br>nts, this date will not be liste |
| record specifies a delayed effec<br>The 90th day after the record is  | tive date, but not an e<br>filed.  | effective time, at 12  | 2:01 a.m. on the earlie  |
| ed April 14   | 2016   |  |  |
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Filing Fee: \$25.00