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Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : ASSURED ACCOUNTING AND TAX SERVICES

Account Number : I20180000048 : (954)793-0353 Phone : (954)944-3163 Fax Number

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **MENART LLC**

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Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MENARI 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 04/20/2016 and and agree in the Articles of Organization for this Limited Liability Company were filed on 04/20/2016
Florida document number L16000077719
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:
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:
(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 office address on our records, enter the name of the new registere
agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Flortila street address
Emer Florida sucei daaress
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

(((H21000363420 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

Title	Name	Address	Type of Action
MGR	BIRSEN A. MENGUC	17091 NW 23rd ST	DSAdd
		PEMBROKE PINES, FL 33028	_ □Remove
			_ Change
	·		_ 🗇 Add
			🗆 Remove
	•		Change
	·		□Add
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an effective dat ote: If the da	e is listed, the dat	a the date of fli e must be specific als block does no he Department o	and cannot be po of meet the app	licable statutor	ng or more than 9 y filing require	(optional) Odays after filing ments, this date	.) Pursuant to 605.02 will not be listed :
ecord specifi is filed.	es a delayed eff	ective date, but	not an effectiv	e time, at 12:01	a.m. on the ea	rlier of: (b) Th	ne 90th day after th
ated <u>SI</u>	<u>EPTEMBE</u>	R 28th		·			
<u></u>	1 Mengur (Sep 28, 2021						