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## COVER LETTER

TÒ:		istration Sec ision of Corp				
CUDIC	CT.	SAHANI E	NTERPRISES LLC			
SUBJE	CI;					
			Amendment and fee(s) are sub	-		
			SAMARA HANI			
				Name of Person		
			SAHANI ENTERPRISES	LLC		
			<del></del>	Firm/Company		
			12360 NW 26TH STREE	Γ.		
				Address	71 63	
			PLANTATION, FL 33323	3		4
			sahani.enter@gmail.com	City/State and Zip Code		
			E-mail address: (	to be used for future annual report notif		•
For furt	her ir	nformation co	oncerning this matter, please c	all:		-
SAMA	RA F	IANI		717 875-6104		
Marie Complete Marie Communication	- Late 111 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Name of	f Person		Telephone Number	
Enclose	d is a	check for th	e following amount:			
\$25	.00 F	iling 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAHANI ENTERPRISES LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility 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)	
R 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 he	
Name of New Registered Agent:	
New Registered Office Address:	<u> </u>
	Enter Florida street address
	City , Florida Zip.Code 100 100 100 100 100 100 100 100 100 10
New Registered Agent's Signature, if changing Registered Agent	
	יון ויידי
I hereby accept the appointment as registered agent and agon provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	provided for in Chapter 605, F.S. Or, if this document is

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>	Address	Type of Action
MGRM	HANI, SAMARA	12360 NW 26TH STREET	
		PLANTATION, FL 33323	□ Remove
			E Change
MGRM	MARINO, PATRICIA	12360 NW 26TH STREET	Add
		PLANTATION, FL 33323	□ Remove
			☐ Add
			☐ Remove
			A RO OF Add OF A RO OF
			Change Dehange
			□ Remove
			☐ Change
			Add
			Remove
			Change

PLANTATION, FL 33323  PLANTATION, FL 33323	т Т Н	nembers as MGRM, respectively as following:  Fitle MGRM  JANI, SAMARA  2360 NW 26TH STREET  LANTATION, FL 33323	lay both	
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Signature of a member or authorized representative of a member		Signature of a member or authorized representative of a member		

Page 3 of 3

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