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S. WARREN 0CT 2 4 2017

## **COVER LETTER**

TO:	Registration Se Division of Co			
SHE	RAHMAN BJECT:	LE PLLC		
301		Name of Lin	nited Liability Company	
The	enclosed Articles of	Name of Limited Liability Company  cles of Amendment and fee(s) are submitted for filing.  prrespondence concerning this matter to the following:  Javed Rahman  Name of Person  Rahman Le PLLC  Firm/Company  2030 S. Douglas Rd Suite 107  Address  Coral Gables, FL 33134  City/State and Zip Code  Javed@Rahmanle.com  E-mail address: (to be used for future annual report notification)  ation concerning this matter, please call:		
Plea	se return all correspo	ondence concerning this matter	to the following:	
		Javed Rahman		
			Name of Person	
		Rahman Le PLLC		
			Firm/Company	<del></del>
		2030 S. Douglas Rd Suite	107	
			Address	
		Coral Gables, FL 33134		
		<del></del>	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	ication)
For f	further information c	oncerning this matter, please c	all;	
Javed Rahman				
	Name o	f Person		Telephone Number
Encl	osed 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 (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

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L16000128076}{L16000128076}$ .	were filed on 07/06/2016 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	vility company here:			
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	2030 S. DOUGLAS RD, SUITE 107			
Principal office address MUST BE A STREET ADDRESS)	CORAL GABLES, FL 33134			
Inter new mailing address, if applicable:	2030 S. DOUGLAS RD, SUITE 107			
Mailing address MAY BE A POST OFFICE BOX)	CORAL GABLES, FL 33134			
<ol> <li>If amending the registered agent and/or registered of egistered agent and/or the new registered office address here</li> </ol>				
	ž·			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	Florida			
	City Zip Code			

New Registered Agent's Signature, if changing Registered Agent:

RAHMAN LE PLLC

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

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

<u> Citle</u>	<u>Name</u>	Address	Type of Action
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