

L160000142719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

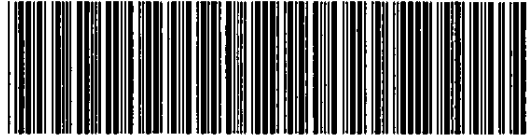
(Document Number)

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TALLAHASSEE, FLORIDA

2016 SEP 13 A 11:48

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SEP 15 2015

BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 30, 2016

MOHAMMED BELARJ
8418 VIA BELLA NOTTE
ORLANDO, FL 32836

SUBJECT: BH MINI MART, LLC
Ref. Number: L16000142719

We have received your document for BH MINI MART, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 816A00018404

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BH Mini Mart, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mohammed Belarj

Name of Person

BH Mini Mart, LLC

Firm/Company

8418 via Bella Notte

Address

Orlando, FL 32836

City/State and Zip Code

belarj@belarj.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mohammed Belarj

516 972 2360

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

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TALLAHASSEE, FLORIDA
SEP 13 2018

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BH MINI MART, 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 July 26, 2016 and assigned
Florida document number L16000142719.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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: N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: N/A

(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
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Mohammed Belarj

New Registered Office Address:

8418 via Bella Notte

Enter Florida street address

Orlando

City

Florida 32836

Zip 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

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>	<u>Type of Action</u>
MGR	Maazouza O. Haddad	8418 via Bella Notte, Orlando, FL 3	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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 ALBANY COUNTY CLERK
 ALBANY, NY

FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2016 SEP 13 AM 11:48
ALLAHABAD, INDIA

2- 45 11000

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated August 25, 2016

Signature of a member or authorized representative of a member

Mohammed Belarj

Typed or printed name of signee