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K. SALY SEP 1 2 2018

COVER LETTER

Division of Co	orporations		
SUBJECT:	Madlen	Lic	
	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Moho	anad Akbik	Esq.
		Firm/Company	
	611 S. FA	Harrison Aue. #	(33
	•	Address	
	Clear wa	Ler, FL 33 City/State and Zip Code	756
	E-mail address: (to be used for future annual report notif	(ication)
For further information	concerning this matter, please ca	all:	
Mohnad	Akbik, Esq.	at (727) 223 - Area Code Daytime	· 3005
Name	of Person	Area Code Daytime	e 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:

TO:

Registration Section

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

FILED SECRETARY OF STATE ALLAMASSEE, FLORID	
E) CORID	4

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A	Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liab Florida document number L 16000144	ility Company were filed on <u>A0g</u> 会	+ 2, 2016 and assigned
The Articles of Organization for this Limited Liability Company were filed on Articles of Organization for this Limited Liability Company were filed on Articles and assigned Florida document number Libood 14488. This amendment is submitted to amend the following: 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailling 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 neregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address		
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
•	2X)	
registered agent and/or the new registered office	registered office address on our reco e address here:	ords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	ldress
-	City	Florida
Articles of Organization for this Limited Liability Company were filed on Agost 2, 2016 and assignida document number L16000144828. If amending name, enter the new name of the limited liability company here: If amending name, enter the new name of the limited liability company here: new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" or the abbreviation "LLC" or the abbreviation "LLC" or new principal offices address, if applicable: ncipal office address MUST BE A STREET ADDRESS) er new mailing address, if applicable: illing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of stered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	гір Соае	

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>	Type of Action
MGR	Madlen Azarki	16136 Lythan Dr	Add
		Odessa, FL 33556	Remove
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Note: If the date	f other than the date slisted, the date must be s inserted in this block of ive date on the Depart	foes not meet the a	pplicable statutory	or more than 90 days at filing requirements, t	otional) ter filing.) Pursuant to d his date will not be l	605.0207 isted as
e record spec The 90th da	ifies a delayed eff after the record	ective date, bu is filed.	t not an effecti	ve time, at 12:01	l a.m. on the ea	rlier of
Dated	9-5-2018		·			
	9-5-2018 March	Alue ature of a member or	AZGU L authorized represent	ative of a member		
		Live 1				

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