# L1760006320

| (Address)                                |
|--|
| (Address)                                |
| (City/State/Zip/Phone #)                 |
| PICK-UP WAIT MAIL                        |
| (Business Entity Name)                   |
| (Document Number)                        |
| Certified Copies Certificates of Status  |
| *Special Instructions to Filing Officer: |
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TALLANASSEE, FLORIDA

TALLANASSEE, FLORIDA

17 FEB - I PH 4: 28

D. SCOTT FEB 2 2017

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| Pious Hasid LLC    | <del></del> |            |                                |
|--------------------|-------------|------------|--------------------------------|
|                    |             |            |                                |
|                    |             |            |                                |
|                    |             |            |                                |
|                    | <del></del> |            |                                |
|                    |             | _          | Art of Inc. File               |
|                    |             |            | LTD Partnership File           |
|                    |             |            | Foreign Corp. File             |
|                    |             | _          | L.C. File                      |
|                    |             | _          | Fictitious Name File           |
|                    |             | _          | Trade/Service Mark 7           |
|                    |             | ļ <u>-</u> | Merger File 7                  |
|                    |             |            | Art. of Amend. File 92         |
|                    |             | _          | RA Resignation                 |
|                    |             | _          | Dissolution / Withdrawal       |
|                    |             | -          | Annual Report / Reinstatement  |
|                    |             | -          | Cert. Copy                     |
|                    |             | _          | Photo Copy                     |
|                    |             | _          | Certificate of Good Standing   |
|                    |             | _          | Certificate of Status          |
|                    |             | -          | Certificate of Fictitious Name |
|                    |             | _          | Corp Record Search             |
|                    |             | _          | Officer Search                 |
|                    |             | _          | Fictitious Search              |
| Signature          |             |            | Fictitious Owner Search        |
| ŭ                  |             | -          | Vehicle Search                 |
|                    |             |            | Driving Record                 |
| Requested by: Seth |             | -          | UCC 1 or 3 File                |
| Name               | Date        | Time -     | UCC 11 Search                  |
| Mattic             | Date        | -          | UCC 11 Retrieval               |
| Walk-In            | • -         |            | Courier                        |

#### **COVER LETTER**

|                | distration Section of Corp |   |   |  |
|----------------|----------------------------|---|---|--|
| SUBJECT:       | PIOUS HAS                  | SID LLC   |   |  |
| SUBJECT,       |                            | Name of Lin                                     | nited Liability Company   |  |
| The enclosed   | l Articles of A            | mendment and fee(s) are sub                     | omitted for filing.   |  |
| Please return  | all correspon              | dence concerning this matter                    | to the following:   |  |
|                |                            |   |   |  |
|                |                            |   | Name of Person  |  |
|                |                            |   |   | <u></u>  |
|                |                            |   | Firm/Company  |  |
| •              |                            |   | Address   | <del></del>  |
|                |                            |   | City/State and Zip Code   | <b>Z</b> E <b>1</b>  |
|                |                            | steinmarc@gmail.com                             |   | 14 五四  |
| For further in | formation con              | E-mail address: (                               | to be used for future annual report notifica<br>all:                | ation)   |
| ·              | Name of I                  | Dawas   | at () Area Code Daytime T   | elephone Number  |
|                | Name of i                  | reison  | Area Code Daytime 1   | elephone Number  |
| Enclosed is a  | check for the              | following amount:                               |   |  |
| \$25.00 Fi     | iling Fee                  | □ \$30.00 Filing Fee &<br>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 Tailahassee, FL 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| PIOUS HASID LLC   |   |                           |
|---|---|---------------------------|
| (Name of the Limited<br>(A                                | Liability Company as it now appears on our records.) Florida Limited Liability Company) |                           |
| The Articles of Organization for this Limited Liab        | oility Company were filed on 01/09/2017   | and assigned              |
| Florida document number L17000006320                      | ,   |                           |
| This amendment is submitted to amend the follow           | ring:   |                           |
| A. If amending name, enter the new name of the            | ne limited liability company here:  |                           |
| SIYATA LLC  |   |                           |
| The new name must be distinguishable and contain the word | is "Limited Liability Company," the designation "LLC" or                                | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicab          | le:   |                           |
| (Principal office address MUST BE A STREET.               | ADDRESS)  |                           |
|   |   |                           |
|   |   | - oz = =                  |
| Enter new mailing address, if applicable:                 | · · · · · · · · · · · · · · · · · · ·   | 20                        |
| (Mailing address MAY BE A POST OFFICE BO                  | <u></u>   | <b>建筑</b> 安 三             |
|   |   | <u> </u>                  |
|   |   |                           |
| B. If amending the registered agent and/or                |   | nter the name of the nev  |
| registered agent and/or the new registered offic          | e address nere:   | 鲁治 分                      |
|   |   | 7"                        |
| Name of New Registered Agent:                             |   |                           |
| New Registered Office Address:                            |   |                           |
| <del>-</del> ————   | Enter Florida street address  | <del></del>               |
| -   | , Florid  | a                         |
|   | City  | 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> Type of Action \_□ Add \_□ Remove ☐ Change \_ Add \_□ Remove \_ Change \_ Add \_□ Remove ☐ Change Remove Change STOP AND ☐ Remove ☐ Change □ Add □ Remove \_□ Change

|  |   |                            | <u>.</u>  |  |
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|  |   |                            |   |  |
| fective date, if other than the one offective date is listed, the date must tote. If the date inserted in this blocument's effective date on the Department. | ck does not meet the applic             | able statutory filing re   | (optional<br>than 90 days after filin<br>quirements, this dat | )<br>g.) Pursuant to 605.0<br>e will not be listed |
| record specifies a delayed<br>The 90th day after the reco  | effective date, but no<br>ord is filed. | t an effective time        | e, at 12:01 a.m.  | ECG _  |
| Feburary 1   | 2017                                    |                            |   | Allasses   |
|  | ······································  | ·                          |   | 祭室上  |
| 4.   |   |                            |   | ini 🕮 🚒  |
| (hou )to   |   |                            |   |  |
| Then Ite   | Signature of a member or auth           | orized representative of a | member  | M 9 05   |

Page 3 of 3

Filing Fee: \$25.00