

L17000084864

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : VAST ACCOUNTING & TAX SERVICES, LLC
Account Number : I20230000003
Phone : (347)387-5854
Fax Number : (800)217-8791

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: shaker_sane@yahoo.com

2025 OCT 13 PM 1:06
STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

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2025 OCT 13 AM 11:04

TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SHAKER INVESTMENT LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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COVER LETTER

Thursday, October 9, 2025

To: Registration Section
Division of Corporation

Subject:

SHAKER INVESTMENT LLC
Name of Limited Liability Company

The enclosed Articles of Amendment to Articles of Organization and Fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

VAST Accounting & Tax Services
4714 Wolfram Ln
New Port Richey, FL 34653
Fax: 800-217-8791

For further information concerning this matter, please call or e-mail:
Magdy Youssef 727-425-1333 or e-mail at vastcpa@gmail.com

Enclosed is our fax filing coversheet for \$25.00 for the Filing Fee and adding a new MGR as follow:

AVA KYROLOS GROUP INC.
1633 BROKEN BRANCH DR
WESLEY CHAPEL FL 33543

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

(((H25000361779 3)))

SHAKER INVESTMENT 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 04/17/2017 and assigned
Florida document number L17000084864.

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 "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)

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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>	<u>Type of Action</u>
MGR	AVA KYROLOS GROUP INC	1633 BROKEN BRANCH DR	☒ Add
		WESLEY CHAPEL FL 33543	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Add
			☐ Remove
			☐ Change

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

[illegible]

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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 505.0207 (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 October 9, 2025

samek shaker

Signature of a member or authorized representative of a member

Sameh Shaker

Typed or printed name of signee