117000148162

(Requ	uestor's Name)	
(Addı	ress)	
(Addı	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doct	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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07/24/17--01019--002 **\$0.00



COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI	AMAR 73	MLK LLC		
SUBJE	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Shota Lomidze		
			Name of Person	
			Firm/Company	
		1261 NW 27th Avenue		
			Address	
		Pompano Beach, FL 33069)	
			City/State and Zip Code	
		ShotaL44@yahoo.com		
For fur	ther information c	e-mail address: (to be used for future annual report noti all:	ncation)
	Lomidze		954 449-5583	
	Name o	f Person		e Telephone Number
Enclos	ed is a check for th	e following amount:		
□ \$2:	5.00 Filing Fee	S30.00 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**

Following .

17 JUL 24 AM A: 58

AMAR 73 MLK LLC

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

The Articles of Organization for this Limited Liabilit Florida document number L17000148162		and assigned
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 designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	ODRESS)	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
		Florido
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Regist	ered 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
PRES	Simranjeet Singh	117-07 95th Ave Richmond Hill, N	□ Add
			■ Remove
			□ Change
PRES	Devinder Singh	117-07 95th Ave Richmond Hill, N Y	119 ■ Add
			□ Remove
			Change
			Remove
			Change
			Remove
			Change
		 	Add
			Remove
			Change
			Add
			Remove
			□ Change

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ctive date, if other than the effective date is listed, the date in this iment's effective date on the	ust be specifie a block does no	ind cannot be pri t meet the appl	icable statuto	ng or more than ry filing requir	(optiona 90 days after filir ements, this dat	g.) Pursuant to 605.0
ecord specifies a delay ne 90th day after the re	ed effective ecord is filed	e date, but r d.	not an effec	tive time, a	t 12:01 a.m	. on the earlier
d	- 	2017				
		<u></u>				
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Page 3 of 3

Filing Fee: \$25.00