118000010755

(Re	equestor's Name)	
(Ac	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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J. HARRIS

COVER LETTER

TO:	Registration Se Division of Cor			
enio ii	SAHARA U	JSA GROUP, LLC		
SUBJI	ECT:	Name of Lim	ited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		PARVEEN HASHAM		
			Name of Person	
		SAHARA USA GROUP, I	LLC	
			Firm/Company	
		3609 SW 161 TERRACE		
			Address	<u>L.W.</u>
		MIRAMAR, FLORIDA 33	3027	
			City/State and Zip Code	
		phasham06@gmail.com		
		E-mail address: (to be used for future annual report notifi	cation)
For fu	ther information co	oncerning this matter, please ca	all:	
PARV	EEN HASHAM		954 242-3668	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
\$2 \$2	5.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SANAKA USA UKUUP, LLC				
(<u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records.) ed Liability Company)			
he Articles of Organization for this Limited Liability Compalorida document number L18000010755	ny were filed on JANUARY 11th, 2018	and assigned		
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited li	ability company here:			
ne new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" or the abl	oreviation "L.L.C."		
nter new principal offices address, if applicable:	No.	× 8		
Principal office address MUST BE A STREET ADDRESS)		- 1755 ₁		
		5 1 xxv		
	4.	4 C.Y v		
nter new mailing address, if applicable:	٠.,			
Mailing address MAY BE A POST OFFICE BOX)	<u>~</u>			
Tuning address MAT BE A FOST OFFICE BOX	¥	6 7:		
. If amending the registered agent and/or registered egistered agent and/or the new registered office address have a Name of New Registered Agent: New Registered Office Address:	nere:	the name of the		
	Enter Florida street address			
	, Florida	Zip Code		
	City	zıр 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>	Address	Type of Action
MGR	FAHMIL HASHAM		🗆 Add
		3609 SW 161 Terr, Miramar, FL 33027	Remove
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Effective date, if other than the date fan effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	does not meet the applica	20th, 2018 o date of filing or more ble statutory filing r	(option: than 90 days after fili equirements, this da	a l) ng.) Purs ate will	suant to not be	605.0207 listed as
ne record specifies a delayed e The 90th day after the record		an effective tin	ne, at 12:01 a.n	n. on t	NA 112	
Dated FEBRUARY 20th,	2018				[0] [1]	eu , en ,
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DE WAR	Gan				•	•
Sign	Channer of a member or author	rized representative of	a member		<u>.⊠</u> .>>	-

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00