

48000014136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED
2018 NOV 19 PM 5:24
SEP 27 2018
SALT LAKE COUNTY, UT

Amend

NOV 30 2018

ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TABOULEH CAFE, LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHAKIB SHABAN
Name of Person

TABOULEH CAFE
Firm/Company

7645 MERRILL RD. SUITE 201
Address

JACKSONVILLE FL 32277
City/State and Zip Code

TABOULEHJAX@GMAIL.COM
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

SHAKIB SHABAN at (904) 745-6900
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
2018 NOV 19 PM 5:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TABOULEH CAFE, 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 01/16/2018 and assigned
Florida document number L18000014136.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

SHAKIB SHABAN

New Registered Office Address:

7645 MERRILL RD. SUITE 201

Enter Florida street address

JACKSONVILLE

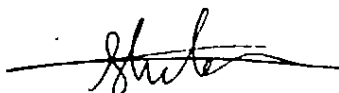
City

Florida FL 32277

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>
MGRM	SAMALEH, SARI E		<input type="checkbox"/> Add
		7645 MERRILL RD, SUITE 201	<input checked="" type="checkbox"/> Remove
		JACKSONVILLE, FL 32277	<input type="checkbox"/> Change
MGR	SHAKIB SHABAN	7645 MERRILL RD, SUITE 201	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32277	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ESPERO BARAKAT	7645 MERRILL RD, SUITE 201	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32277	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

SOLD THE BUSINESS, CHANGING OWNER SHIP OF LLC

FROM: (SELLER) SARI E. SALAMEH

TO: (BUYER) SHAKIB SHABAN

E. Effective date, if other than the date of filing: 12/17/2018 (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 605.0207 (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 NOV 14, 2018 . 2018


Signature of a member or authorized representative of a member

SARI E. SALAMEH
Typed or printed name of signer