## L1800035951

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Special Instructions to Filing Officer:			



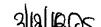


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SECRETARY OF STATES

2010 MAR -9 P 3:



## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Shere K	han LLC ne of Limited Liability Company
The enclosed Articles of Amendment and fee(s	are submitted for filing.
Please return all correspondence concerning thi	is matter to the following:
Rai	MS CY Daher  Name of Person
<u>She</u>	reknanllo Firm/Company
2106	SW 3rd Terrale
Ft. Lau	derdale FL 33315  City/State and Zip Code  1. daner @ gmail. (om address: (to be used for future admual report notification)
For further information concerning this matter,	please call:
Rams'ey Daher Name of Person	City/State and Zip Code  1. Come of Mail (OM)  address: (to be used for future armual report notification)  please call:  at (954) 646-0510  Area Code Daytime Telephone Number 22
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fe Certificate of S	ee & \$\Bigcup \$55.00 \text{ Filing Fee & } \$60.00 \text{ Filing Fee,} \$\$ Status
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

Shere K	han LLC
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000035951</u> .	1/8/18
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)	2106 SW 3rd Terraced Ft. Lauderdale, FL 33315
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	2106 SW 3rd Terrale Et. Lauderdale, FV 33315
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Emer Florida street address , Florida 25
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGR</u>	Steven S. Parry	350 NW 17th Pl. #. Falanderdale, FL	Z_□ Add 33311 XRemove
<u>MGR</u>	Ramsey Daher	2106 SW 3rd Terro Ff. Lauderdale, FL 3	Change  Add  Remove
			□ Change
			□ Remove
			Change
		IA SECULARIA	Remove
		SSEC FLORID	Add Remove
			☐ Change
			□ Remove
			□ Change

•If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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 pling.) Pursuant to Mote: If the date inserted in hits block does not meet the applicable statutory filing requirements, this date is decided advantaged and the pline of the decided occurrent's effective date on the Department of State's records.  (b)  (c)  (c)  (c)  (c)  (c)  (c)  (c)	
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Signature of a number or authorized representative of a member	
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V Steven S. Parry	

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Filing Fee: \$25.00