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AND
FILED
2019 MAR 26 PM 2:45
SECRETARY OF STATE
CLARK COUNTY, NV

T.C.
2/24/19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SULTAN FUAT, 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:

MARY E. PRADOS

Name of Person

MARY E. PRADOS, CPA PA

Firm/Company

8740 NE 2ND AVENUE

Address

EL PORTAL, FL 33138

City/State and Zip Code

MEPCPA@AOL.COM

E-mail address: (to be used for future annual report notification)

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AND
FILED
2019 MAR 26 PM 2:45
REGISTRATION SECTION
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

MARY E. PRADOS CPA 305 756-1040
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 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

X NO ARE CHANGING ADDRESS +
REGISTERED AGENT

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

SULTAN FUAT, 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 04/25/2018 and assigned
Florida document number L18000101418.

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)

8740 NE 2ND AVENUE

EL PORTAL, FL 33138

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8740 NE 2ND AVENUE

EL PORTAL, FL 33138

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FILED
2019 MAR 26 PM 2:45
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, FLORIDA

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:

MARY E. PRADOS, CPA PA

New Registered Office Address:

8740 NE 2ND AVENUE

Enter Florida street address

EL PORTAL

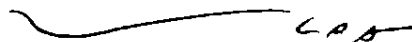
City

Florida 33138

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

Title	Name	Address	Type of Action
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MGRM	ATLINTAS, SELCUK	5187 S.W. 121ST TERRACE	<input type="checkbox"/> Add
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		COOPER CITY, FL 33330	<input checked="" type="checkbox"/> Remove
--	--	-----------------------	--

			<input type="checkbox"/> Change
--	--	--	---------------------------------

MGRM	OZTURK, FUAT	5187 S.W. 121ST TERRACE	<input type="checkbox"/> Add
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		COOPER CITY, FL 33330	<input checked="" type="checkbox"/> Remove
--	--	-----------------------	--

			<input type="checkbox"/> Change
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MGRM	OZTURK, AHMET KEREM	5187 S.W. 121ST TERRACE	<input type="checkbox"/> Add
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		COOPER CITY, FL 33330	<input checked="" type="checkbox"/> Remove
--	--	-----------------------	--

			<input type="checkbox"/> Change
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MGRM	ATLINTAS, SELCUK	8740 NE 2ND AVENUE	<input checked="" type="checkbox"/> Add
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		EL PORTAL, FL 33138	<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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MGRM	OZTURK, FUAT	8740 NE 2ND AVENUE	<input checked="" type="checkbox"/> Add
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		EL PORTAL, FL 33138	<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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MGRM	OZTURK, AHMET KEREM	8740 NE 2ND AVENUE	<input checked="" type="checkbox"/> Add
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		EL PORTAL, FL 33138	<input type="checkbox"/> Remove
--	--	---------------------	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

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

N/A

APPROVED
AND
FILED
2019 MAR 26 PM 2:45
SECRETARY OF STATE
ATLANTA, GEORGIA

E. Effective date, if other than the date of filing: _____ (optional)

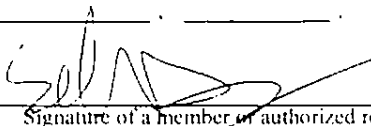
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 14TH DAY OF MARCH 2019



Signature of a member or authorized representative of a member

ATLINTAS, SELCUK

Typed or printed name of signee