

L18000131934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

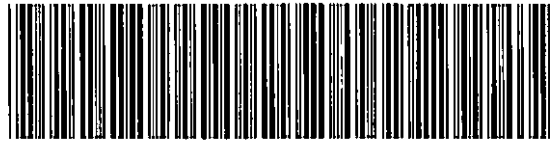
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATION
18 JUN 14 AM 10:06

N COOPER

JUN 15 2018

MR YVES RIVIERE
4 ALLEE DE CHAPONVAL
78590 NOISY LE ROI, France

06/12/2018,

Division of Corporations,
P. O. Box 6327,
Tallahassee, FL, 32314.

AZALEA 35, LLC

Dear Sir or Madam,

Please find attached an amendment for AZALEA 35, LLC.

By mistake, my name is wrong on the initial registration.

Please find attached copy of my passport for confirmation.

Regards,

Yves Riviere

A handwritten signature in black ink, appearing to be 'Yves Riviere', written in a cursive style.

COVER LETTER

**TO: Registration Section
Division of Corporations**

AZALEA 35, LLC

SUBJECT: _____
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:

NISHAD KHAN

Name of Person

LAW OFFICE OF NISHAD KHAN

Firm/Company

617 E COLONIAL ST

Address

ORLANDO, FLORIDA 32828

City/State and Zip Code

nak@nishadkhanlaw.com

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

For further information concerning this matter, please call:

NISHAD KHAN

-407 228-9711

at (_____) _____

Name of Person

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

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

AZALEA 35, 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 05/25/2018 and assigned
Florida document number L18000131934

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 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)

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SECTION
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18 JUN 14 AM 10:06

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City 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>
MGR	RIVIERE, YVES	4 ALLEE DE CHAPONVAL.	<input checked="" type="checkbox"/> Add
		78590 NOISY LE ROI, - FRANCE	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GASTON, YVES J	4 ALLEE DE CHAPONVAL.	<input type="checkbox"/> Add
		78590 NOISY LE ROI, - FRANCE	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<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.)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

18 JUN 14 AH 10:06

E. Effective date, if other than the date of filing: 06/12/2018 (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.

(b) The 90th day after the record is filed.

Dated ORLANDO, 06/12/2018

Signature of a member or authorized representative of a member

YVES RIVIERE

Typed or printed name of signee