18000195439

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(Address)
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(City/State/Zip/Phone #)
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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

IKH Services	ر له ل	
(Name of the Limited Liability Compa (A Florida Limited)	nny as it now appears on our records Liability Company)	<u>.)</u>
The Articles of Organization for this Limited Liability Company Florida document number 18000/95439		
This amendment is submitted to amend the following:		18 SEP -
A. If amending name, enter the new name of the limited liab		(J)
The new name must be distinguishable and contain the words "Limited Liabil	al Services LLC	<u></u> ;
The new mains 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:		.s. 1.69
(Principal office address MUST BE A STREET ADDRESS)	1)/A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
B. If amending the registered agent and/or registered off 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:		
	Enter Florida street address	
	, Flori	ida
	City	Zip Code
New Registered Agent's Signature of changing Devictored 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:

	authorized Member		
Title	<u>Name</u>	Address	Type of Action
			☐ Add
			Remove
			☐ Change
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	\longrightarrow	Signature of a member	or authorized	contative of	has	$\underline{\underline{\psi_i}}$
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