118000272611

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îO:		istration Sec sion of Corp		•	
		Hakim & Ala	am LLC	•	
SUBJE	CT:		Name of Limit	ed Liability Company	
The enc	losed	Articles of A	mendment and fee(s) are subn	nitted for filing.	
lease r	eturn	all correspon	dence concerning this matter to	o the following:	
			Farjana Hakim		
				Name of Person	 _
			Hakim & Alam LLC		
				Firm/Company	
			18100 Star Jasmine CT		
				Address	<u> </u>
			Lehigh Acres, Florida - 3397	72	
			Jhonny_ctg@yahoo.com	City/State and Zip Code	
			E-mail address: (t	o be used for future annual report notifi	cation)
For fur	ther ii	nformation co	ncerning this matter, please ca	di:	
Farjan	а На	kim		239 2736898 at ()	
		Name of	Person	Area Code Daytime	Telephone Number
Enclose	ed is a	a check for th	e following amount:		
= \$2:	5.00 I	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

Hakim & Alam LLC	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) i Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number L18000272611	Company were filed on November 26, 2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company here:
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDI	RESS)
	<u> </u>
Enter new mailing address, if applicable:	5 T
(Mailing address MAY BE A POST OFFICE BOX)	至
	. ب
	50
B. If amending the registered agent and/or regis registered agent and/or the new registered office add	stered office address on our records, enter the name of the nees 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>	Type of Action
MGR	Mohiuddin Jhonny Hakim	18100 Star Jasmine CT, Lehigh Acres, Florida - 33972	■ Add
			□ Remove
			Change
			□ Add
			☐ Remove
			□ Change
			Remove
			□ Remove
			Change
	 		
			Remove
			Change
			DAdd
			□ Remove
			□ Chanve

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(If an effect Note: If	date, if other than the date of filing:
	od specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the cord is filed.
Dated	
·	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00