## L19000098611

| (Re                                     | equestor's Name)   |             |  |  |
|---|--------------------|-------------|--|--|
| (Ac                                     | ldress)            |             |  |  |
| (Ac                                     | idress)            |             |  |  |
| (Ci                                     | ty/State/Zip/Phone | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL        |  |  |
| (Bu                                     | usiness Entity Nar | me)         |  |  |
| (Document Number)                       |                    |             |  |  |
| Certified Copies                        | _ Certificates     | s of Status |  |  |
| Special Instructions to Filing Officer: |                    |             |  |  |
|   |                    |             |  |  |
|   |                    |             |  |  |
|   |                    |             |  |  |
|   |                    |             |  |  |

Office Use Only



700329401687

05/22/18--01010--023 \*\*30.00

2019 KAY 22 MA 9: 54

AFIROVED AND FILED

T GLASS

## COVER LETTER

| то:       |        | istration S<br>ision of Co  |  |  |  |
|-----------|--------|-----------------------------|--|--|--|
| SHRJE     | CT.    | Nothing (                   | Comes Easy LLC   |  |  |
| 5(71)     |        |                             | Name of Limited I.   | iability Company   | _  |
|           |        |                             |  |  |  |
| The enc   | losed  | Articles of                 | `Amendment and fee(s) are submitte   | d for filing.  |  |
| Please r  | eturn  | all correspo                | ondence concerning this matter to the  | r following:   |  |
|           |        |                             | Muhammad Rasheed   |  |  |
|           |        |                             |  | Name of Person   |  |
|           |        |                             | Nothing Comes Easy LLC   |  |  |
|           |        |                             |  | Firm/Company   | _ <del>_</del>   |
|           |        |                             | 3013 Laurel Ridge Circle   | ۵  |  |
|           |        |                             | - Ob to Edute Mage Ones  | Address  |  |
|           |        |                             |  |  | 201  |
|           |        |                             | Riviera Beach FL 33404   |  |  |
|           |        |                             |  | y/\$tate and Zip Code  | 2019 KAY 22  |
|           |        |                             | Mr.motheco@gmail.com   | used for future annual report notification)  | - 12 6   |
| For furtl | her ir | iformation o                | concerning this matter, please call:   |  | 14 99 O  |
| Muhar     | nma    | d Rashee                    | ed   | at (561 ) 267-9411   | 9.54   |
|           |        |                             | of Person  | Area Code Daytime Telephone Nun  | nber   |
| Enclose   | d is a | check for t                 | he following amount:   |  |  |
|           |        | iling Fee                   | / -  | Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)                                 | Filing Fee,<br>ficate of Status &<br>fied Copy<br>onal copy is enclosed) |
|           |        | Regist<br>Divisio<br>P.O. B | JNG ADDRESS:<br>ration Section<br>on of Corporations<br>dox 6327<br>assee, F1, 32314 | STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle | i:   |

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limi  |  |  |  |
|--|--|--|--|
|  | ted Liability Comp<br>(A Florida Limiter | pany as it now appears<br>d Liability Company) | on our records.)                             |
|  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  | ,,, ,  |  |
| The Articles of Organization for this Limited L                                      | iability Compar                          | y were filed on                                | and assigned                                 |
| Florida document number L19000098611   | <del></del> -                            |  |  |
| This amendment is submitted to amend the foll  | owing:                                   |  |  |
| A. If amending name, enter the new name of   | of the limited lia                       | bility company her                             | <u>e</u> :                                   |
| The new name must be distinguishable and contain the v                               | words "Limited Lia                       | bility Company," the des                       | signation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applic                                       | cable:                                   | 3013 Laurel R                                  | idge Circle                                  |
| (Principal office address MUST BE A STREE  | ET ADDRESS)                              |  |  |
|  |  | Riviera Beach                                  | FL 33404                                     |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) |  | 3013 Laurel R                                  | idge Circle 20                               |
|  |  | Riviera Beach                                  | FL 33404                                     |
| B. If amending the registered agent and registered agent and/or the new registered o | ***                                      |  | our records, enter the name of the           |
| Name of New Registered Agent-  | Northwest                                | t Registered Age                               | nt LLC                                       |
| Name of New Registered Agent:  | <u></u>                                  |  | nt LLC =                                     |
| Name of New Registered Agent:  New Registered Office Address:                        | <u></u>                                  | St N STE 300                                   | nt LLC                                       |
| -  | 7901 4th 5                               | St N STE 300  Enter Florid                     | la street address                            |
| -  | <u></u>                                  | St N STE 300  Enter Florid burg                | la street address<br>, Florida 33702         |
| -  | 7901 4th S                               | St N STE 300  Enter Florid burg  Cay           | la street address                            |

| MGR= Ma<br>AMBR= Au | inager<br>thorized Member |                          |                  |
|---------------------|---------------------------|--------------------------|------------------|
| <u> Fitle</u>       | <u>Name</u>               | <u>Address</u>           | Type of Action   |
| AMBR                | Cayla J. Rasheed          | 3013 Laurel Ridge Circle | 🗖 Add            |
|                     |                           | Riviera Beach, FL 33404  | □ Remove         |
|                     |                           |                          | □ Change         |
|                     |                           |                          |                  |
|                     |                           | <u></u>                  | 🗀 Remove         |
|                     |                           |                          | Change           |
|                     |                           |                          |                  |
|                     |                           |                          | Rémove  2 Chango |
|                     |                           |                          |                  |
|                     |                           |                          | — □ Remove       |
|                     |                           |                          | Change           |
|                     |                           |                          |                  |
|                     |                           |                          | Remove           |
|                     |                           |                          | □ Change         |
| <del></del>         |                           |                          | Add              |
|                     |                           |                          | ☐ 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:

| <del></del>  |  |  | <del>~</del>  |
|--|--|--|---------------|
|  |  |  |               |
|  |  | •  | <del></del>   |
|  | ,  |  |               |
|  | * 12   |  | <del></del>   |
|  |  |  | <del></del>   |
|  | ···········  | . 6  | 701           |
|  |  | \<br>:• 1  |               |
|  |  | · · · · · · · · · · · · · · · · · · ·  | FILE<br>FILE  |
|  |  | 111  |               |
|  |  | 3.7  | π.<br>Ö       |
| (ote: If the date inserted in this blo<br>ocument's effective date on the Do | t be specific and cannot be<br>ock does not meet the a<br>epartment of State's rec<br>l effective date, bu | (optional)  prior to date of filing or more than 90 days after filing.) Pursuant pplicable statutory filing requirements, this date will not bords.  t not an effective time, at 12:01 a.m. on the e | e listed as t |
| May 16   | 201  | 9  |               |
|  | Signature of a member or   | authorized representative of a member  | _             |
| Muhammad I   |  |  |               |
|  | Typed or   | printed name of signee   |               |
|  |  | age 3 of 3   |               |

Filing Fee: \$25.00