h19000110369

(Ře	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Nar	me)
-		
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO:

TO: Registration S Division of Co			
SUBJECT:	5252 IN	VESTMENTS LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		FAWZI FAROUN Name of Person	
	50		
	52	52 INVESTMENTS LLC Firm/Company	
	4.0		
		61 NW 150TH AVE UNIT	
	PEN	MBROKE PINES FL 3302 City/State and Zip Code	8
	FARC	DUNFAWZI@YAHOO.CO	NΛ
		(to be used for future annual report no	
For further information c	concerning this matter, please c	all:	
FAWZI F	FAROUN	at (_561)305-9	9638
Name o	of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he following amount:		
X i S25.00 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 Addres		Street Address:	
Registration 9 Division of C		Registration Se Division of Co	
P.O. Box 632	27	The Centre of	•
Tallahassee, FL 32314		2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIED

		/ JUL 25 PH 3: 4
(Name of the Limited Liability Comp (A Florida Limited	ny as it now appears on our records.) lability Company)	in de la companya de La companya de la companya de
The Articles of Organization for this Limited Liability Company Florida document numberL19000110369		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:	1961 NW 150TH AVE UNIT 10	05
(Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINES FL 33028	
Enter new mailing address, if applicable:	1961 NW 150TH AVE UNIT' 1	05
(Mailing address MAY BE A POST OFFICE BOX)	PEMBROKE PINES FL 33028	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ddress on our records, enter the name o	of the new registered
Name of New Registered Agent: FAWZI	FAROUN	
New Registered Office Address: 1961 NW	50TH AVE UNIT 105	
	Enter Florida street address	

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.

PEMBROKE PINES

If Changing Registered Agent, Signature of New Registered Agent

, Florida <u>33</u>028

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>	Address	Type of Action
MGR_	FAWZI FAROUN	1961 NW 150TH AVE UNIT: 105 PEMBROKE PINES FL 33028	 X JAdd
			□Remove
			Change
			□Add
			□Remove
		<u></u>	□ Change
		□Remove	
			□Change
			□Add
		□Remove	
		□Change	
		□Add	
		□Remove	
		□Change	
		□Add	
		□Remove	
			□Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	te date, if other than the date of filing:
he record ord is file	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 d.
Dated _	JULY 21
	Signature of a member or authorized representative of a member
	FAWZI FAROUN
	Typed or printed name of signee