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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of C	orporations				
SUBJECT:	13495 STIRLING TRUST I	LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sub	emitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
		Adnan Malik Asad			
		Name of Person			
		13495 STIRLING TRUST LLC			
	Firm/Company				
		13495 STIRLING ROAD			
Address				6	
	5	SOUTHWEST RANCHES, FL 33330		901/	
		City/State and Zip Code		25	
	E-mail address: t	issa@quadrantholdings.com to be used for future annual report notifi	cation)	TE:	-
For further information	concerning this matter, please c	·		5: 04	A STATE OF
Adnan Malik		at (954) 410-3388	···		7
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 State Certified Copy (additional copy is enc		
Regi	LING ADDRESS: stration Section tion of Corporations	STREET/COURIE Registration Section Division of Corpora			

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1349	5 STIRLING TRUST LLC	
(Name of the Limited L	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabili	ty Company were filed on08/02/2019	and assigned
Florida document number L19000197467		
This amendment is submitted to amend the following	g:	
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" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	G (2)
(Principal office address MUST BE A STREET AL	DDRESS)	
		<u> </u>
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or r registered agent and/or the new registered office:		enter the name of the new
Name of New Registered Agent:	Adnan Malik Asad	_
New Registered Office Address:		
	Enter Florida street address	
	, Flori	ida
	Cap	sup come

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>	Address	Type of Action
MGR	Adnan Malik Asad	13495 STIRLING ROAD	🗆 Add
		SOUTHWEST RANCHES, FL 33330	☐ Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change
			
		 	□ Remove
			☐ Change
			☐ Remove
			☐ Change
			Add
			Remove
			☐ Change

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ffective date, if ot	her than the de	te of filing:	8/2/2019			optional)	
an effective date is list ote: If the date inso ocument's effective	ted, the date must be erted in this block	specific and car does not mee	t the applicab		more than 90 day	s after filing.) Pursu	
e record specific The 90th day a			e, but not	an effective	time, at 12:	01 a.m. on th	e earlier of
ated		8/2	2019	·			
		-					
					ve of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00