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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: SWEET H	EAVEN PROPERTIES 3, LLC	•	
SUBJECT: OVER		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Mohammad Sohail	N «CD	
		Name of Person	
	Dawood Sohail Law PLLC	Firm/Company	
		· macompany	
	709 Virginia Drive	Address	
	Orlando, FL 32803	City/State and Zip Code	
	umera_mirza@hotmail.com		
	E-mail address: (to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
Mohammad Sohail		at (407) 583-9160 Daytin	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SWEET HEAVEN PROPERTIES 3, LLC				
(Name of the Limited Liability Company as it r (A Florida Limited Liability C	now appears on our records.) Company)			
The Articles of Organization for this Limited Liability Company were file	led on 10/16/2019 and assigned			
Florida document number L19000260353				
This amendment is submitted to amend the following:				
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 Comp	pany," the designation "L.L.C." or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	209			
(Principal office address MUST BE A STREET ADDRESS)	in the second se			
	;			
	- ¹ -			
Enter new mailing address, if applicable:	T ====================================			
(Mailing address MAY BE A POST OFFICE BOX)	g: ;			
	6			
3. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, enter the name of the new regist			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	Marida			
Cin	, Florida, Florida			

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	Bilal M. Mirza	1629 ROCKDALE LOOP	
		LAKE MARY, FL 32746	Remove
			☐ Change
MGR	Nabeel M. Mirza	1629 ROCKDALE LOOP	□Add
		LAKE MARY, FL 32746	■Remove
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			Remove
			Change
			□Remove

E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record 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 record is filed.
Dated <u>C/6/24</u> Manually Signature of a member or authorized representative of a member
W.man
Signature of a member or authorized representative of a member
LIMERA- MIRZA- Typed or printed name of signee

Filing Fee: \$25.00