Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : LAW OFFICES OF MICHAEL A. HALBERG,

Account Number : I20100000044 Prone

: (954)252-0589

Fax Number

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WAMA INVESTMENTS LIMITED LIABILITY COMPANY

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MAR 1 3 2020

I ALBRITTON

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WAMA Investments Limited Liability Company		
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appears on our records. lability Company)	)
The Articles of Organization for this Limited Liability Company of Plorida document number <u>L2000066852</u> .	were filed on February 28, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
WAMA Investments LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		70034
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		R D
Enter new mailing address, if applicable:	<del></del>	
(Mailing address MAY BE A POST OFFICE BOX)		30
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	ddress on our records, <u>enter t</u>	he name of the new registered
New Registered Office Address:		
New Registered Office Address.	new mailing address, if applicable:  g address MAY BE A POST OFFICE BOX)  mending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address	
	. Flo	rida
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
<del></del> -	performance of my duties, an provided for in Chapter 605, F	d I am familiar with and E.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

3/12/20, 12:50 PM To: +1 850-617-6383 From: +1 954-252-0589

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	Amgad Fahim	3450 S. Ocean Blvd. #510, Palm Beach, FL 33480	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
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Note: If	e date, if other than the dative date is listed, the date must be the date inserted in this blockt's effective date on the Department.	does not meet the ar	plicable statutory til	(opt more than 90 days after ling requirements, th	ional) r filing.) Pursuant to 60: is date will not be tist	5.0207 ted as
e record s rd is filed	specifies a delayed effective d l.	ate, but not an effecti	ve time, at 12:01 a.n	n, on the earlier of: (	b) The 90th day afte	r the
Dated _	March 4		.0			
			authorizant .			
	// Si	gnature of a member or	1, 1,7			
		MRGED	Habeb printed name of signee			

Filing Fee: \$25.00