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COVER LETTER

TO: Registration Se Division of Cor			:
ERHAND	A, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ERIC PAPOYANS		
		Name of Person	
	ERHANDA, LLC		
ERHANDA, LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: ERIC PAPOYANS Name of Person ERHANDA, LLC Firm/Company 68 SE 6 STREET, SUITE 2709 Address MIAMI, FLORIDA 33131 City/State and Zip Code consulting tangerine@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Eric Papoyans Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Escripticate of Status Certificate Copy (additional copy is enclosed) Mailing Address: Registration Section Street Address: Registration Section	 		
	68 SE 6 STREET, SUITE	2709	
	ERHANDA, LLC Name of Limited Liability Company		
	MIAMI, FLORIDA 3313	l	
		City/State and Zip Code	
	•		otification)
For further information of			ouncariony
Eric Papoyans			
Name o	f Person	Area Code Dayı	ime Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status &
_		_	
P.O. Box 632	27	The Centre of	f Tallahassee
Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ERHANDA, LLC	
(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company were filed on03/30	/2020 and assigned
Florida document number L20000092899	ف
This amendment is submitted to amend the following:	20
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 design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our recoragent and/or the new registered office address here:	ds, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: Enter Florida s	reel address
	, Florida
City	Zip Code
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	HANANE AMIR	68 SE 6TH STREET	■ Add
		SUITE 2709	□ Remove
		MIAMI, FLORIDA 33131	□Change
			
			□ Remove
			Change
			
		···	□ Remove
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ective date, if other than the da	ate of filing:		(optional)	
n effective date is listed, the date must be te: If the date inserted in this block current's effective date on the Department's	e specific and cannot be prior to k does not meet the applica	o date of filing of more than	90 days after filing.) Pursuant to 6	05.0207 sted as
ecord specifies a delayed effective of is filed.	late, but not an effective tir	ne, at 12:01 a.m. on the e	arlier of: (b) The 90th day at	ter the
	2020			
ited July 19	, <u></u>			
ated July 14	gnature of a member or autho			

Filing Fee: \$25.00

Typed or printed name of signee