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TALLAHASSEE, FLORIDA

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SPEC INSTI	IAL RUCTIONS:		

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Shir & Investment of Panama City IIU 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:
Bhaves L Amin Name of Person
Shv & Investment of fanomacity LLC Firm/Company
2319 5 Huy 77, \$1 1498 Lynn Haven, FL 32444
City/State and Zip Code 64m 1980 @ 3mail. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Area Code Daytime Telephone Number Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee \$ Certificate of Status \$60.00 Filing Fee, Certificate of Status & Certificate of Status

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Shiv & Investor (Name of the Limited Liability)	Company as it now appears on o	City LLC	
(A Florida Li	imited Liability Company)	-	
The Articles of Organization for this Limited Liability Con	npany were filed on	14/2020	and assigned
Florida document number <u>L2 0000 4351</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designa	tion "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u></u>	σ	20
		<u> </u>	21.
• •			300
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Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		19 B	
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B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our is here:	records, enter the r	name of the new
Name of New Registered Agent:		·	, , , , , , , , , , , , , , , , , , ,
New Registered Office Address:			
	Enter Florida stree	et address	
•		, Florida	
	City		Code

New Registered Agent's Signature, if changing Registered Agent:

A Commence of the commence of

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
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		Panama CHY FL 32405	□ Remove
			Change
wor	Swapnil Amin	2704 Reduil Cr	D Add
		Panama City, FL 3240	<u>™</u> Remove
	Sairem Hilding Lic		Change
<u> </u>		2319 5. HWY 79 # 1498	Add
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