

L20 000 368862

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(Address)

(Address)

(City/State/Zip/Phone #)

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2014 FEB 16 PM 3:47
FEB 16 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASYA 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:

MURAT UYGUN
Name of Person

ASYA LLC
Firm/Company

13818 Sunshowers Cir.
Address

ORLANDO, FLORIDA, 32818
City/State and Zip Code

mngllc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MURAT UYGUN at (407) 731-1632
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee.
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|---|

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 212

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ASYA LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/23/2020 and assigned Florida document number L 20000368862.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ELAS INVESTMENT LLC.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

12754 Lakebrook Dr.
Orlando, FL 32828

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12754 Lakebrook Dr.
Orlando, FL 32828

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MURAT UYGUN

New Registered Office Address:

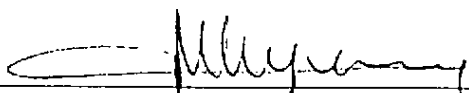
12754 Lakebrook Dr.

Enter Florida street address

Orlando, Florida 32828
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

2007 FEB 16 00:34:47

(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)(b)

7-10-68

Dated 02/13, 2024

MUZAT UYGUN
Typed or printed name of signee

[illegible]