2/4/2021

Division of Corporations

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Division of Corporations

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AARON AND ETHAN HOLDING, LLC

Certificate of Status	0
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Page Count	04
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Help

**COVER LETTER** 

TO: Registration Sec		÷.		r <del>ý</del>	
Division of Cor					
A Aaron and E SUBJECT:	Ethan Holding, LLC				
	Name of Limi	ited Liability Company			
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
	ndence concerning this matter				
	Sarfraz Husain				
		Name of Person		202	
	Aaron and Ethan Holding,	LLC		2021 FEB -4	<b>~</b>
		Firm/Company		- ::: · · ·	
	1933 SW Oakwood Road			(元) (4) (4) (4) (4)	
		Address		PM 4: 45	į
	Port Saint Lucie, Florida 3	4953		- <del>1</del>	1
		City/State and Zip Code		_	
	sarfrazh2000@yahoo.com	to be used for future annual report notif	ication)		
For further information c	oncerning this matter, please or				
Sarfraz Husain		954 803-9523			
Name o	f Person	at ()	: Telephone Numbe	<del></del>	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &	
Mailing Address		Street Address: Registration Sec	etion		
Registration S Division of C		Division of Cor			
P.O. Box 632		The Centre of T			
Tallahassee, l		2415 N. Monroe	Street, Suite	810	

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aaron and Ethan Holding, LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 1-13-2021	_ and assigned
Florida document number L21000030400	<del></del> '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the abbre	viation "L.L.C."
the new name mass or distinguishable and contain no words	3=13	
Enter new principal offices address, if applicable:	<u>}−-;-;-</u> >-,:-	(A) (A)
(Principal office address MUST BE A STREET ADDI	RESS)	1 Perms
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	un w Littu	
n ann an 1910 - Adum të anticolor	TIP.	-t- -t-
Enter new mailing address, if applicable:	TEL:	ហ
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, enter the name o	of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
<del></del>	City Piorida	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 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	Alice Husain		□Add
		1933 SW Oakwood Rd, Port Saint Lucie, Fl 34953	■ Remove
			□Change
Member	Sarfraz Husain	1933 SW Oakwood Rd, Port Saint Lucie, Fl 34953	<b>\(\overline{\overline</b>
			□Remove
			□Change
		LI AH	_
		(C) SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	· -
		<b>2.</b>	□Add
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ctive date, if other than the	data of filings			(optional)		
effective date is listed, the date must	be specific and cannot be	prior to dute of fil	ing or more than 90	days after filing.)	Pursuan	st to 605.0
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