Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000284008 3)))



H210002840083ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name 1: THE FARAH LAW FIRM, P.A.

Account Number : I20050000023 : (904)443-0060

Fax Number : (904)443-0061

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** The same of t

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAMZI&BEN LLC

Certificate of Status	0
Ccrtified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help



farahlaw 9044430060 >> 850-617-6381 AKTICLES OF AMENDMENT

TO

ARTICLES OF ORGANIZATION

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) Articles of Organization for this Limited Liability Company were filed on 04/09/2021 and assigned and assigned florida document number L21000164931 This amendment is submitted to amend the following: 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 designation "LLC" or the aboreciation 22.1.C." Enter new principal offices address, if applicable: Principal affice 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 records, enter the name of the new registered and/or the new registered Agent: New Registered Office Address: Farah Law		RAMZI&BEN LLC			
This amendment is submitted to amend the following: 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 designation "LLC" or the abbreviation of the rew name new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS! Enter new mailing address, if applicable: Malling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered address here: Name of New Registered Agent: New Registered Office Address: Farah Law Semer Florido street address Jacksonville Florida 32217 Zip Code		(Name of the Limi	ted Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)	
This amendment is submitted to amend the following: 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 designation "LLC" or the abbreviation of the new name number of the new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Conter new mailing address, if applicable: Malling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered address here: Name of New Registered Agent: New Registered Office Address: Parah Law 6550 St. Augustine Road, Suite 103 Emer Florido street address Jacksonville			iability Company were filed on $\frac{0}{2}$	04/09/2021	and assigned
the lew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation and the remaining address, if applicable: Principal office address MUST BE A STREET ADDRESS	lori	ia document number L21000164931			
Inter new principal offices address, if applicable: Principal office address MAY RE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Parah Law	his	amendment is submitted to amend the following	towing:		
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Malling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Name of New Registered Agent: Farah Law	Ili	amending name, enter the new name of	of the limited liability company	<u>licre</u> :	
Principal office address MUST BE A STREET ADDRESS) Conter 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 records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: New Registered Office Address:	he 16	w name must be distinguishable and contain the	words "Limited Liability Company," the	: designation "LLC" or the aচ্চ	oreviation 1.C."
Enter new mailing address, if applicable: Malling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Parah Law 6550 St. Augustine Road, Suite 103 Emer Florido street address Jacksonville Jacksonville Tip Code	nte:	r new principal offices address, if appli	cable:		=
Enter new mailing address, if applicable: Malling address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: New Registered Office Address:	Prin	cipal office address MUST BE A STRE	ET ADDRESS)	<u> </u>	<u> ೧೭೧ 🏡 🔼 🚉 🔻 </u>
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Parah Law					ሚያች. ከ
If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: Farah Law New Registered Office Address: Enter Florido street address Jacksonville Florida Jacksonville Florida Jacksonville Jacks			<i>j</i>	- -	= _U ; = x
Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered address here: Name of New Registered Agent: Farah Law	nte	r new mailing address, if applicable:			
S. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: Farah Law	1			7	5 ^{FR} 65
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: Farah Law					
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: Farah Law			-		
Name of New Registered Agent: New Registered Office Address: New Registered Office Address 6550 St. Augustine Road, Suite 103				records, enter the name	c of the new register
Name of New Registered Agent: New Registered Office Address: City New Registered Agent:	gen	t and/or the new registered office addre	ess here:		
New Registered Office Address: 6550 St. Augustine Road, Suite 103 Enter Florido street address Jacksonville City: Tip Code		Name of New Registered Agent:	Farah Law		
Jacksonville, Florida 32217 City: Zip Code			6550 St. Augustine Road. Suite	103	
City: Zip Code		New Registered Office Address:			
City: Zip Code			Jacksonville	Florida 327	217
less Registered Agent's Signature, if changing Registered Agent:				, 1.10110a	Zip Code
	iew	Registered Agent's Signature, if changing	Registered Agent:		
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with				- · ·	

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.

|--|

MGR = Manager

AMBR = Authorized Member

#21000 284008 3

Title	Name	<u>Address</u>	Type of Action
MGR	Ben Haj Belgacem Ridha	5201 Baymeadows Road	Add
		Jacksonville, Florida 32217	
	¥		
AMBR	Ben Haj Belgacem Ridhs	520! Baymendows Road	
		5201 Baymeadows Road	Remove
			□ Change
MGR	Zouhair Ben Abel Kader Nefzi	5201 Baymeadows Road	Add)
		5201 Baymendows Road	□Remove
			□Add
			Remove
			⊟Add
			□Remove
			Change
			
ļ	j		©Change

2021-07-26 17:21 farahlaw 9044430060 >> 850-617-6381 H L I U O O Z & Y O O & S

		·	
		·	
			<u></u>
·	·		
			<u></u>
<u> </u>		e o ge	1 1021 J
_		HAS	JL 2
		—————————————————————————————————————	- 0
	`\		_ <u></u>
· · · · · · · · · · · · · · · · · · ·			- 06
			
			
ote: If the date inserted in t	the date of fung: the must be specific and cannot be prior to date of filing or this block does not meet the applicable statutory filing the Department of State's records.	(optional) more than 90 days after filing.) Puring requirements, this date will	rsuant to 605.02 I not be listed
coord specifies a delayed ef is filed.	fective date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90)th day after th
July 26	2021		
	Drub 124		
<u></u>	Signature of a member or authorized representative	e of a member	
	17		

H21000 284 008 3

Filing Fee: \$25.00