

121 000 306911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

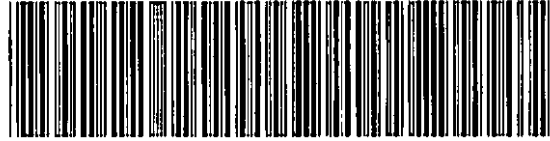
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 OCT 25 PM 5:44
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NOV 03 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4GEMS4EVER 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:

SADDAF F. MEHAR and SULTAN Z. KHAN

Name of Person

4GEMS4EVERLLC

Firm/Company

7712 CARRIAGE HOMES DR #10

Address

ORLANDO, FL 32819

City State and Zip Code

saddafmehar2001@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kasib Mateen

at (678) 803-6700
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input 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 810
Tallahassee, FL 32303

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TALLAHASSEE, FL

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

4GEMS4EVER 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 JULY 06, 2021 and assigned
Florida document number 121000306911.

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 "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 records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

SULTAN Z. KHAN

New Registered Office Address:

7712 CARRIAGE HOMES DR #10

Enter Florida street address

ORLANDO

Florida

32819

City

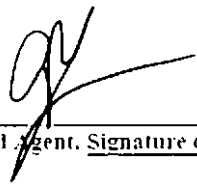
Zip Code

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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 an existing 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	FURYAL MEHAR	7712 CARRIAGE HOMES DR #10	<input type="checkbox"/> Add
		ORLANDO, FL 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	SULTAN Z. KHAN	7712 CARRIAGE HOMES DR #10	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32819	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

2021 OCT 15 PM 5:44
MILLER, J. ELLIOTT
7712 CARRIAGE HOMES DR #10
ORLANDO, FL 32819

2021 OCT 25 PM 5:45
FALLING SPRING

(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)

Typed or printed name of signee