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SUBJEC		SSAD REA	L ESTATE LLC		2021 AUG -4	PM 3:28		
300300	· • ·		Name of Lim	ited Liability Company	Tall	- «		
The enclo	osed A	rticles of Ar	mendment and fee(s) are sub	mitted for filing.				
Please ret	turn al	l correspond	ence concerning this matter	to the following:				
			Chris Wegner					
				Name of Person				
			Wegner Law PLLC					
				Firm/Company	- -			
			875 109th Ave N. Ste. 302					
				Address				
			Naples, FL, 34108					
				City/State and Zip Code	,	_		
			cwegner@wegnerlawfirm.c			_		
			E-mail address: (to be used for future annual	report notification)	;	20	
For furthe	er info	rmation con	cerning this matter, please ca	all:		TALLA	2021 AUS -	<u> </u>
	 .	Manua en	· · · ·	at () Area Code	Davidor Talankar Mari	<u> </u>	ŧ.	
Enclosed	l is a cl	Name of P	erson following amount:	Area Code	Daytime Telephone Numl	per Paris	AH 10: 2:	J
\$25.0			☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy		Filing Fee, icate of Status	w	

Mailing Address:

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

(additional copy is enclosed)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certified Copy (additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Assad Real Estate 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 $\frac{\text{July 19th, 2021}}{\text{1000}}$ and assigned Florida document number ____L21000327470 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 "LLC." 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: New Registered Office Address: Enter Florida street address City

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.

New Registered Agent's Signature, if changing 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>	<u>Address</u>	Type of Action
MGR	Michael Assad	1380 Tiffany 1.n Ste. 2207	≅Add
		Naples, FL, 34105	□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
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