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01/24/24--01017--005 **25.00

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
~~	DARIN OF	FLORIDA LI.C		
SUBJECT:		Name of Lim	nited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		SETH AMKRAUT		
			Name of Person	
		GERSTIN & ASSOCIATI	ES	
			Firm/Company	
		40 SE 5TH ST., SUITE 6	10	
			Address	
		BOCA RATON, FL 33432	2	
			City/State and Zip Code	
		TAHSIN.KARAKOYUN@ E-mail address: (SUPERGRUP.COM.TR to be used for future annual report no	tification)
For further in	nformation c	oncerning this matter, please c		-
SETH AMK	RAUT		561 750-3456	
	Name o	f Person	at () Area Code Daytii	me Telephone Number
Enclosed is a	check for th	ne following amount:		· · · · · · · · · · · · · · · · · · ·
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres		Street Address: Registration St	ection
Div	vision of C	orporations	Division of Co	orporations
Reg Div P.C	gistration S	Section orporations 7	Registration Solvision of Co The Centre of	orporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		City	Zip (Code
	POMPANO BE	EACH	, Florida	۲.
New Registered Office Address:		Enter Florida str	eet address	
New Registered Office Address:	1800 N FEDER	RAL HWY., UNIT 210		-
Name of New Registered Agent:	GABRIEL CHO	OCRON	·	<u>, , , , , , , , , , , , , , , , , , , </u>
				:
If amending the registered agent and/or ent and/or the new registered office addr		address on our record	ls, enter the name of the	new regis
<u> </u>	POMPANO BEACH	, FL 33062		
lailing address MAY BE A POST OFFICE	UNIT 210			
iter new mailing address, if applicable:		1800 N FEDERAL H	WY.	
		POMPANO BEACH	, FL 33062	
rincipal office address MUST BE A STRE	<u>(ET ADDRESS)</u>	UNIT 210		
Enter new principal offices address, if applicable:		1800 N FEDERAL HWY.		
e new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designa	tion "LLC" or the abbreviation	on "L.L.C."
If amending name, enter the new name	of the limited liab	<u>ility company here</u> :		
is amendment is submitted to amend the fo	· ·			
orida document number 1.21000352389				
e Articles of Organization for this Limited		were filed on AUGUS	ane ane	d assigned
		ALICHE	T 5 3031	
	(111 milat Emmed 2	ny as it now appears on o Liability Company)		

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 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
			□Aḋd
			□ Change
			□Add
			□Remove
			Change
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	: :
fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day ote: If the date inserted in this block does not meet the applicable statutory filing requirement cument's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier is filed.	of: (b) The 90th day after the
ned Decembra 18 2022	
Signature of a member or authorized representative of a member	·
IBRAHIM YASUBUGA	
Typed or printed name of signee	

Filing Fee: \$25.00