## 121000356858

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## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor					
Fairfax De	x Development LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Naveed Zaerzadeh				
		Name of Person	<del></del> _		
	Fairfax Development LLC				
		Firm/Company			
	1057 Fairfax cir w				
		Address			
	Boynton Beach, Florida, 33436				
	<del> </del>	City/State and Zip Code			
	naveedzaerzadeh@gmail.cc	om to be used for future annual report notil	- · · ·		
For further information c	concerning this matter, please co		eanon,		
Naveed Zaerzadeh		561 8460384			
Name o	f Person	at () Area Code Daytime	: Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 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)		
Mailing Addres Registration S		Street Address: Registration Sec	rtion		
Division of C P.O. Box 632	iorporations	Division of Corp	porations		
P.O. Box 632	' 1	The Centre of T	aHanassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fairfax Development LLC				
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Lia	y as it now appears on our re ability Company)	ecords.)		
The Articles of Organization for this Limited Liability Company with Florida document number $\frac{1.21000356858}{1.21000356858}$ .	were filed on 08/09/2021		and assig	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company here:			
FairFax CRE, LLC				
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation	"LLC" or the abb	reviation "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 ac agent and/or the new registered office address here:	ldress on our records, <u>e</u>	nter the name	of the new	registere
Name of New Registered Agent:			. 197	
New Registered Office Address:			8	
	Enter Florida street a	ddress	\\ \partial	
		, Florida	. 📆	
	City		Zip Code	مسيد ا
New Registered Agent's Signature, if changing Registered Agent:			1 10	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	verformance of my dutie vovided for in Chapter 0	s, and I am fo 605, F.S. Or. i	miliar with f this docun	and ient is

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>	<u>Address</u>	Type of Action
	·		□Add
			□Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			□ Change
			□Add
			□Remove

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
the record cord is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	October 22 , 2021 .  Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Naveed Zaerzadch
	Typed or printed name of signee

Filing Fee: \$25.00