## LZ1000366224

(Req	uestor's Name)	
(Adda	ress)	
(Add	ress)	
(City/	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	me)
(Doc	ument Number)	1
Certified Copies		
Special Instructions to Fi	iling Officer:	
<u> </u>		
Amend.	-	

Office Use Only



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SECRETARY OF STATE

SECRETARY CORPORATION

MIN. - B AM II: 38

J DENNIS

OCT 2 7 2022

## . COVER LETTER

Registration Section

TO:

Division of Cor	porations		
1700-401 N	E 105TH STREET LLC		•
SUBJECT:		·	· · ·
	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Ali-Asgar Mandsourwala		
		Name of Person	
	1700-401 NE 105TH STRI	ET LLC	
		Firm/Company	
	15251 NE 18TH AVE, STE	£9	
		Address	<del></del>
	NORTH MIAMI BEACH,	F1.33162	
		City/State and Zip Code	<del></del>
	ali.mandsaurwala@gmail.cc	om to be used for future annual report noti	fication)
Dan firmban in formation of	oncerning this matter, please of		(1000)
Ali-Asgar Mandsourwala	*	305 450-1007	
711 Tagai Manos Mi Mar	•		
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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	Section	<u>Street Address:</u> Registration Se	
Division of C		Division of Cor	•
P.O. Box 632 Tallahassee.		The Centre of T	allahassee e Street, Suite 810
rananassee.	1 12 ガムカナマ	2713 N. 19101110	e once, ourse ore

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1700-401 NE 105TH STREET LLC	•		
(Name of the Limit	ted Liability Company as it no (A Florida Limited Liability Co	ow appears on our record ompany)	<u>s.</u> )
The Articles of Organization for this Limited L Florida document number <u>L21000366224</u>	iability Company were file	ed on {	8 116 21 and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, <u>enter the new name o</u>	f the limited liability com	ipany here:	
The new name must be distinguishable and contain the v	words "Limited Liability Compa	my," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:		
Principal office address MUST BE A STREE	ET ADDRESS)	<del></del>	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addre		on our records, <u>enter</u>	the name of the new registere
Name of New Registered Agent:	Ali-Asgar Mandsourwala	a	
New Registered Office Address:	15251 NE 18TH AVE, S		
		Enter Florida street addres	
	NORTH MIAMI BEACI	<u>н</u> . FI	orida 33162 Zip Code

## 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
MGR	Ali Mandsaurwala	15251 NE 18th Ave. Ste 9	□Add
		North Miami Beach FL 33162	<del></del>
			KRemove
			Change
MGR	Ali-Asgar Mandsourwala	15251 NE 18th Ave., Ste 9	XAdd
		North Miami Beach FL 33162	_
			□ Remove
			□Change
			□Remove
			□Change
			Change
			□Add
		<del></del>	□Remove
			□Change
	<u> </u>		
			□Remove
			□ Change

Omy	change to be made is	to update the missp	selling of the current regis	ter agent and au	thorize person to this 1.	LC.	
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ctive	date, if other tl	ıan the date o	f filing:			(optional)	
effecti	ve date is listed, the	date must be spec	cific and cannot be prior	r to date of filin	g or more than 90 da	ys after filing.) Purst	
			ent of State's records		y timig requiremen	ns, ms date win n	or oc nated
ord s filed.	_	effective date, l	but not an effective t	ime, at 12:01	a.m. on the earlie	r of: (b) The 90th	day after t
mea.							
d	August	3		<u>,                                    </u>			
	•	Cola O	mandsannal	h_			
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