## L21000423866

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## **COVER LETTER**

TO: Registration Sec Division of Corp		•	
UASHINE L	LC	•	
	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	
	USMAN MUSHTAQ		
		Name of Person	
	UASHINE LLC		
		Firm/Company	
	33 Whispering Pines Dr		
		Address	
	Ithaca, NY 14850		
		City/State and Zip Code	
	UAshine786@gmail.com		
	E-mail address: (	to be used for future annual report notif	ication)
For further information co	ncerning this matter, please ca	ıll:	
USMAN MUSHTAQ		281 2014285	
Name of	Person		e Telephone Number
Enclosed is a check for the	e 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)
<b>5</b> 7 (1)		9	

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UASHINE LLC				
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)			
The Articles of Organization for this Limited Liability Company were filed Clorida document number <u>L21000423866</u> .	on September 27, 2021		and assi	gned
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability compa	any here:			
he new name must be distinguishable and contain the words "Limited Liability Company	," the designation "LLC" or the	he abbrevi	ation "L.I	C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)		<u> </u>	202	
			3 SEP	
		75	۱ هـ	
nter new mailing address, if applicable:		LAPASSES	Ċn	131
Mailing address MAY BE A POST OFFICE BOX)		-71	Īĸ	9
Hulling address MAT BE A FOST OFFICE BOX		<del></del>	<del></del>	1
		<u>:</u>	<del>- చ్-</del>	
3. If amending the registered agent and/or registered office address on gent and/or the new registered office address here:	our records, enter the i	name of	the new	registe
Name of New Registered Agent:				
New Registered Office Address:	ter Florida street address			
	, Florida	1		
City			in 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
AMBR	KASHIF RAHIM	33 Whispering Pines Dr, Ithaca, NY 14850	■Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
	<del></del>		□Add
			□Remove
		7	□Change
			□ ∧dd
			□Remove
			□Change
			□Add
			□Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_(optional)
(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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated August 10 **USMAN MUSHTAQ** Typed or printed name of signee