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DIVISION OF CORPORATION

22 MAY 16 PM 12: 04

T. MATTHEWS JUL 14 2022

COVER LETTER

	gistration Se vision of Cor			_		
CHD IFCT.	1028 NE 10					
SUBJECT	Name of Limited Liability Company					
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retur	n all correspo	ndence concerning this matter	to the following:			
		RAMY KARO				
			Name of Person	*		
		1028 NE 10 AVE LLC				
			Firm/Company			
		1028 NE 10TH AVENUE				
			Address			
		FORT LAUDERDALE, F	L 33304			
			City/State and Zip Code			
		RAK156@AOL.COM				
For further i	information c	is-mail address: (oncerning this matter, please co	to be used for future annual rep	ort notification)		
RAMY KA		meering ins matter, prease of	347 351-3	232		
	Name o	f Person	at ()	Daytime Telephone Number		
Enclosed is	a check for th	ne following amount:				
≡ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &		

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

(additional copy is enclosed)

Street Address: 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

OF OF ORGANIZATION STATE OF CURPORATION.



1028 NE 10 AVE LLC

22 HAY 16 PH 12: 04

(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 $\frac{02/14/2022}{1}$ and assigned Florida document number L22000072237 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 "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 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

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 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>	Name	<u>Address</u>	Type of Action
AMBR	RAMI KARO	1028 NE 10TH AVENUE	□Add
		FORT LAUDERDALE, FL 33304	■Remove
		 	□Change
MGRM	RAMY KARO	1028 NE 10TH AVENUE	≣ Add
		FORT LAUDERDALE, FL 33304	□Remove
			□Change
MGRM —	ARIEL ANTEBY SAKA	1028 NE 10TH AVENUE	\
		FORT LAUDERDALE, FL 33304	
			□Change
			□Add
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ffective date, if	Introduct and comments of	k does not meet th	ne applicable statu	tory filing require	ments, this date will	not be listed as
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