## CONTINUS

	(Requestor's Name)
	(Address)
	(Address)
	(Crty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer;
<u> </u>	





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09/23/22--01034--009 \*\*25.00

2022 SEP 23 AM 9: 11
SEPARATION OF STATE

A. BUTLER
SEP 2 6 2022



## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
Sara Group	LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	George G. Pappas		
	<del></del>	Name of Person	
	Pappas Law & Title		
		Firm/Company	
	1822 N. Belcher Rd., Suite	: 200	
		Address	
	Clearwater, FL 33765		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	E-mail address: (	to be used for future annual report not	fication)
For further information c	oncerning this matter, please c	all:	
George G. Pappas		727 447-4999 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Contificate of Status & Certificate Copy (additional copy is enclosed)
Mailing Addres Registration S	Section	<u>Street Address:</u> Registration Se	
Division of C P.O. Box 632		Division of Cor The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FIRED

2022 SEP 23 AM 9: 11

Sara Group LLC

(Name of the Limited Liability Company as it now appears on our records.). 107 STATE
(A Florida Limited Liability Company)

TALLAMASSEE, FL

The Articles of Organization for this Limited Lia	ibility Company	were filed on 04/25/20	)22	and assigned
Florida document number 1.22000171265	·			
This amendment is submitted to amend the following	wing:			
A. If amending name, enter the new name of	the limited liab	lity company here:		
N/A				
The new name must be distinguishable and contain the wo	ords "Limited Liabil	ity Company," the designs	ntion "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applica	ıble:	N/A		
(Principal office address MUST BE A STREET	TADDRESS)			
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE E	<u>30X)</u>			
B. If amending the registered agent and/or reagent and/or the new registered office address  Name of New Registered Agent:	s here:	address on our record		
New Registered Office Address:		Enter Florida et	reet address	
		City	, Florida	Zip Code
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this of	d agent and agreer and complete tered agent as p egistered office	performance of my o provided for in Chap	luties, and I am fo ter 605, F.S. Or, i	miliar with and f this document is

If Changing Registered Agent, Signature of New Registered Agent

If antending 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	Muhammad, Mohsin	4002 Roclinata Palm Ct.	■Add
		Tampa, FL 33624	□Remove
			□Change
<del></del>			
			□Change
			CIRemove
			☐ Change
			□Add
			□Change
	\		□Add
			□Remove
		<u> </u>	□Add
			[]Remove
			□Change

N/A				
			_ <del>_</del>	•
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ctive date, if other than the d	ate of filing:		(optional)	
effective date is listed, the date must b	e specific and cannot be pri-	or to date of filing or more	than 90 days after filing.) P	ursuant to 605.020
e: If the date inserted in this bloc innent's effective date on the Dep	k does not meet the appi artment of State's record	s.	equirements, this date wi	not be fisted a
·				
ord specifies a delayed effective o	late, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The S	Oth day after the
filed.	,			,
September 23	2022			
	2000-	horized representative of		
	inature of a member or aut	horized representative of	a member	
	~			

Filing Fee: \$25.00