122000250101

(Re	questor's Name)	
(Ad	dress)	
•	,	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷ #)
`	,	•
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
	_	
		 1
Special Instructions to	Filing Officer:	

Office Use Only



800392603468

08/12/22--01023--007 **25.00

2022 AUG | 2 PM |: 4; SECRETARY OF STAT TALLAHASSEE, FL

COVER LETTER

ΓO: Registration Se Division of Cor	ection porations				
AAZ CON SUBJECT:	DO, LLC				
	Name of Lin	ited Liability Company			
	Amendment and fee(s) are sub				
	SINA SALEHI				
		Name of Person			
	AAZ CONDO, LLC				
		Firm/Company			
	650 NE 32nd Street, Unit	1806			
		Address			
	Miami, Florida 33137			20.	
	sinasalehi1323@gmail.con	City/State and Zip Code		22 AUG	7
		to be used for future annual report notifi	ication)	TAR TAR	j week
For further information of	concerning this matter, please o	all:		2022 AUG 12 PM 1: 42 SECRETARY OF STATE TALLAHASSEE, FL	1
Name o	of Person	Area Code Daytime	Telephone Number	—FATE 152	
Enclosed is a check for t	he following amount:				
€ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate of Certified Co (additional cop	of Status &	
Maili <u>ng Addre</u> s	55:	Street Address:			

Registration Section
Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

TO:

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

AAZ CONDO, LLC	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000250101</u> .	were filed on 06/07/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ility company here:
The new name must be distinguishable and contain the words "Limited Liabili	ity 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)	<u></u>
Name of New Registered Agent:	ACREA JUG 12 AND
(Name of the Limited Liability Company acit now appears on our records.) (A Florida Limited Liability Company) and the document number 1.22000250101 Immendment is submitted to amend the following: Tamending name, enter the new name of the limited liability company here: Tamending name, enter the new name of the limited liability company here: The new principal offices address, if applicable: Cipal office address MUST BE A STREET ADDRESS) The new mailing address, if applicable: Cipal office address MAY BE A POST OFFICE BOX) The amending the registered agent and/or registered office address on our records, enter the name of the land/or the new registered Agent: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address Florida City Tipical Tipic	Enter Florida street address
New Registered Agent's Signature, if changing Registered Agent:	
provisions of all statutes relative to the proper and complete p	performance of my duties, and I am familiar with and orovided for in Chapter 605, F.S. Or, if this document 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>	Address	Type of Action
MGR	ALI JAMAL	650 NE 32nd Street, Unit 1806	≣ Add
		Miami, Florida 33137	
			☐ Change
			□Add
			□Remove
			—————————————————————————————————————
			SECULETARY Remove
			TE change
			□Add
			Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			Remove
			☐Change

		-	-	, , ,				
	***************************************		<u>. </u>					
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	-	<u> </u>			
	<u> </u>					 -		
		·				·-··		
<u></u>	<u></u>							
. <u> </u>								
				·····				
			-	· · · · · · · · · · · · · · · · · · ·		S	20:	
 		·				ACR.	2022 AUG	•
						TAR	<u>- ट</u> न	41.7 7**
· · · · · · · · · · · · · · · · · · ·			-			ഗ	~~	11
			<u> </u>			SHE S	_골	g 2
						7: 5	ا: <u>ا</u> 2 با :2	
				<u> </u>		121	_ _ _	
•								
	-							
Effective date, if other If an effective date is listed, t	than the date of	filing:			(optional)	\ D	605 I	1202
Note: If the date incerter	t in this black does	anot meet the at	micable statuto	ry ming requirem	ents, ans date	will not b	e listed	i as t
document's effective date	e on the Department	at of State's rec	ords.					
e record specifies a delaye	ad affective date. h	ur not an effecti	ve time, at 12:0	l a.m. on the earl	ier of: (b) Th	ie 90th day	y after t	the
rd is filed.	id circuite date, s							
_ July 28		2022						
		·	·					
Dated July 28		_						

Filing Fee: \$25.00