

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

L220003076452381

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(((H22000307645 3)))



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To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : GARCIA GARCIA ASSOCIATES INC  
 Account Number : I20110000056  
 Phone : (305)823-9292  
 Fax Number : (305)824-0703

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 2022 SEP -7 AM 9:01

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: ATCGIE@yahoo.com

2022 SEP -7 AM 10:52

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 NOOR MARKETS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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J DENNIS  
 SEP 08 2022

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

NOOR MARKETS LLC

(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 06/01/2022 and assigned  
Florida document number L22000252381

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)

1900 E 4TH AVE

Hialeah, FL 33010

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1900 E 4TH AVE

Hialeah, FL 33010

**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:

YOUSIF ODETALLA

New Registered Office Address:

1900 E 4TH AVE

*Enter Florida street address*

HIALEAH

Florida

33010

*City*

*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

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If amended 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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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		_____	<input type="checkbox"/> Remove
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