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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number: I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

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

Email Address: EFILE1234@INCFILE.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN = IKAL DAYAMI ITZE LLC

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## COVER LETTER

TO:	Registration Se Division of Cor		· · · · · ·			
SUB <b>J</b> I		<b>*</b> ;	IKAL DA	YAMI ITZE LLC	_	
SUBJE	CI: ¥	<u> </u>	Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and	l fec(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerni	ing this matter	to the following:		
		LOVETTE	DOBSON			
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		HOUSTON	. TX 77064			
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For fur	ther information c				·	
LOVE	TTE DOBSON			888	8-462-3453	
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Enclos	ed is a check for th	ne following amo	unt:			
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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

and assigned
eviation "L.L.C."
of the new register
Zip Gode
Zip Gode
·· <del></del>

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

Title	<u>Name</u>	Address	Type of Action
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			Remove
			Change
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