

L23000025190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

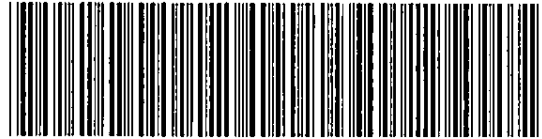
(Business Entity Name)

(Document Number)

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2024 MAR 18 PM 3:07  
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TALLAHASSEE, FLORIDA

RECEIVED

N. HUNT

03/18/24

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR

TALLAHASSEE, FL 32309

(850) 524-5437 / (850) 524-6243 / (850) 491-9625

**Please use funds from this account: I20210000160: \$55.00**

Authorization Signature: James Fulk

**BUSINESS NAME**

**DOCUMENT #**

PEACE TRAIL LLC

L23000025190

X **Certified Copy**

     Certificate of Status

**NEW FILINGS**

     Profit Corp

     Not for Profit

     Limited Liability

     Domestication

     LLLP

     CORP

     Other

     Other

**AMMENDMENTS**

X **Amendment**

     Resignation of R.A. Officer/Director

     Change of Registered Agent

     Revocation of Dissolution

     Merger

     Articles of Conversion

     Restated Articles of Incorporation

     Statement of Authority

RECEIVED  
FLORIDA SECRETARY OF STATE  
TALLAHASSEE, FL  
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**OTHER FILINGS**

     Apostille

     Country

     Annual Report

     Fictitious Name

**REGISTRATION/QUALIFICATIONS**

     Foreign Filing

     Reinstatement

     Qualification

     Other

**EXAMINER'S INITIALS:** \_\_\_\_\_

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Peace Trail LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MUHAMMED UZUM

Name of Person

GRAPE LAW FIRM PLLC

Firm/Company

1350 BROADWAY, STE 1800

Address

NEW YORK, NY 10018

City/State and Zip Code

MYCASE@GRAPELAW.COM

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL  
JUL 16 AM 8:37

For further information concerning this matter, please call:

AHMET TURKOGLU

212 4338383  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☒ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

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

**Street Address:**

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**

Peace Trail 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 01/11/2023 and assigned  
Florida document number L23000025190.

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*

Florida

*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**

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>	<u>Address</u>	<u>Type of Action</u>
MGR	FATIH SIHLAROGLU	8051 N. TAMiami TRAIL SUITE E6	<input checked="" type="checkbox"/> Add
		SARASOTA FLORIDA 34243	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2018 JUN 12 10:37 AM  
OFFICE OF STATE  
TREASURER  
TALLAHASSEE, FL  
AMBR: 370

SEP 13 AM 8:37  
OFF STATE  
FL

OFFICE OF STATE  
TREASURER, FL

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MARCH 12TH 2024

MUHAMMED UZUM, AUTHORIZED REPRESENTATIVE

Typed or printed name of signee