123000215934

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COVER LETTER

SHEVAL	Name of Limited Liability Company sed Articles of Amendment and fee(s) are submitted for filing. arm all correspondence concerning this matter to the following: SHAFIK IBRAHIM Name of Person SHEVAIR LLC Firm/Company 201 - 2930 SOLANO AVE Address HOLLYWOOD, FL 33024 City/State and Zip Code SHEVYSERVICES@GMAIL.COM E-mail address: (to be used for future annual report notification) r information concerning this matter, please call: IBRAHIM 1786 975-5995 Area Code Daytime Telephone Number		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	SHAFIK IBRAHIM		
		Name of Person	
	SHEVAIR LLC		
		Firm/Company	
	201 - 2930 SOLANO AVE	<u>:</u>	
		Address	
	HOLLYWOOD, FL 33024	1	
	_		cation)
For further information	n concerning this matter, please ca	all:	
SHAFIK IBRAHIM		_	
Name	e of Person		Telephone Number
Enclosed is a check for	r the following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			·:

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



SHEVAIR 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 Compar	ny were filed on MAY 02, 2023	and assigned
Florida document number 1.23000215934		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
		
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)		
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 registere agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		
agent and/or the new registered office address here:	e address on our records, <u>enter th</u>	e name of the new registered
New Registered Office Address:	Futar Florida streat address	
		da Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>ıt:</u>	
, , , , , , , , , , , , , , , , , , , ,	te performance of my duties, and s provided for in Chapter 605, F.	I am familiar with and 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
MR	MGR - SHAFIK IBRAHIM	201 - 2930 SOLANO AVE	■Add
		HOLLYWOOD, FL 33024	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		-	Change
			□Add
			□Remove
			□Change
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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	ust be specific and cannot be prio block does not meet the applic	r to date of filing or more than cable statutory filing requi	(optional) 90 days after filing.) Pursuant to 60 rements, this date will not be list	05.0207 (3 sted as th
				an ah a
	ve date, but not an effective t	time, at 12:01 a.m. on the c	earlier of: (b) The 90th day af	ier ine
ne record specifies a delayed effection of is filed. Dated MAY 23		time, at 12:01 a.m. on the c	earlier of: (b) The 90th day af	ier ine
ord is filed.	· 2023	·		er the
ord is filed.		·		er the

Filing Fee: \$25.00

COVER LETTER

TO:

	Registration Se Division of Co			
SUBJEC	SHEVAIR			
SOBILC	1:		nited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing	
		ondence concerning this matter		
		SHAFIK IBRAHIM		
			Name of Person	 _
		SHEVAIR LLC		
			Firm/Company	
		201 - 2930 SOLANO AVI	Ē	
			Address	
		HOLLYWOOD, FL 33024	1	
			City/State and Zip Code	
		SHEVYSERVICES@GMA		
		E-mail address: (to be used for future annual report not	ification)
For furthe	r information c	oncerning this matter, please c	all;	
SHAFIK	IBRAHIM		786 975-5995	
	Name o	f Person		ne Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	0 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)
F	Mailing Addres Registration S	Section	Street Address: Registration Se	ction
Ι	Division of C	orporations	Division of Cor	rporations
	P.O. Box 632 Fallahassee, I		The Centre of 7	Tallahassee e Street, Suite 810
•			2412 IV. MONTO	c onect, sunc 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

OF

SHEVAIR LLC

2023 KATT 26 Fr. (Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	Company were filed on $\frac{MAY}{2}$ 02, 20	and assigned
Florida document number L23000215934	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	<u>.</u>
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADL	DRESS)	
Enter new mailing address, if applicable:		
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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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 to provisions of all statutes relative to the west of the second of the		
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 registe agent and/or the new registered office address here: Name of New Registered Agent:		
the new registered office address here	ed office address on our records, <u>er</u> :	nter the name of the new registere
New Registered Office Address:		
	Enter Florida street ac	ddress
		, Florida
New Registered Agent's Signature if changing Register	City	Zip Code
	t and agree to act in this capacity. complete performance of my duties agent as provided for in Chapter 60 red office address. I hereby confirm	s, and I am familiar with and

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 addec or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MR	MGR - SHAFIK IBRAHIM	201 - 2930 SOLANO AVE	
		HOLLYWOOD, FL 33024	
			□Add
			□Remove
			□Change
-			□Add
			□Remove
			□Change
 -			
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

document's effective date on the Department of State's records.	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed.					
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				ble statutory filing requireme	nts, this date will not be liste	d as
Dated MAY 23 2023	Dated MAY 23 , 2023	e record specifies a delayed effection of its filed.	e date, but not an effective tim	ne, at 12:01 a.m. on the earlie	r of: (b) The 90th day after	the
Sha	Sha.	Dated MAY 23	, 2023	<u>.</u> .		
	/31 -	<i><</i> /	Ca			
Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member		Signature of a member or author	ized representative of a member		

Filing Fee: \$25.00