623000261274

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COVER LETTER

TO:	Registration Division of C						
CUD IE		NDIA GROCERY LLC	·				
SUBJE	SUBJECT:Name of Limited Liability Company						
The encl	losed Articles o	of Amendment and fee(s) are sub	omitted for filing.				
Please re	eturn all corres	pondence concerning this matter	to the following:				
		YOUNUS IQBAL					
			Name of Person				
		ARAB INDIA GROCERY	Y LLC				
Firm/Company							
7163 SARATOGA WATERS WAY							
			Address	- 			
			City/State and Zip Code	7.02			
		LAKE WORTH, FLORIDA					
			to be used for future annual report notification)	رن 			
For furth	ier information	concerning this matter, please c	all:				
YOUN	JS IQBAL		954 451-4475 at ()	က်			
	Name	of Person	Area Code Daytime Telephone N	umber 53			
Enclosed	is a check for	the following amount:					
■ \$25.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)			
	Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303	uite 810			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARAB INDA GROCERY LLC		
(Name of the Limited Liability Com (A Florida Limited	раду as it <u>now appears on our records.</u>) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on MAY 30TH, 2023	and assigned
Florida document number L23000261274		
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" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	701 CONGRESS AVENUE 13	3
(Principal office address MUST BE A STREET ADDRESS)		•
	BOYNTON BEACH, FL 33426	র্ফ
		: :
Interney melling address if applicable.		Ć.}
Enter new mailing address, if applicable:		<u></u>
Mailing address MAY BE A POST OFFICE BOX)		
		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, enter the nai	ne of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
·	. Florida	
	City	7in 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>	Address	Type of Action
MGR	RUBIYA SULTANA	7163 SARATOGA WATERS WAY	■Add
			Remove
		LAKE WORTH, FLORIDA, 33467	□Change
			□Add
			□Remove
			Change
			
			□ Remove
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ective date, if other than the	date of filing:		(optional)	
effective date is listed, the date must e: If the date inserted in this blo	be specific and cannot be prior to ck does not meet the applical	date of filing or more the ole statutory filing requ	an 90 days after filing.)	Pursuant to 605.02 will not be listed:
ument's effective date on the De	partment of State's records.	, ,	,	
cord specifies a delayed effective filed.	date, but not an effective tim	e, at 12:01 a.m. on the	e earlier of: (b) The	90th day after th
HINE LITH	2022			
JUNE 11TH		_ •		
	MM			
		 		
•	Signature of a member or authori	ized representative of a r	nember	