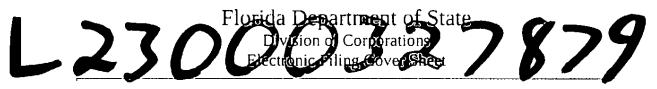
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email Address:	
, 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TWINK FN LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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NOV 3 0 2023

Electronic Filing Menu Corporate Filing Menu

Help

To: 18506176383

Page: 2/4

From: Registered Agents Inc

Fex: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TWINK FN LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on or ability Company)	ur records.)
The Articles of Organization for this Limited Liability Company w Florida document number L23000327879	vere filed on <u>07/09/20</u> :	23 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designat	ion "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)		<u>න</u>
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	ldress on our record	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	vet address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my di ovided for in Chapte	uties, and I am familiar with and er 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

11/29/2023 08:09:14 PST

To: 18506176383

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From: Registered Agents Inc.

Fax: 8134365206

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
AMBR	WASIM, MUHAMMAD FOZAN	2212 S CHICKASAW TRAIL #484	□Add
		ORLANDO, FL 32825	⊠ Remove
			Change
AMBR Waseem, Muhammad Fozan	Waseem, Muhammad Fozan	2212 S CHICKASAW TRAIL #484	⊠ Add
	ORLANDO, FL 32825	□Remove	
		Change	
			□ Add
		□Remove	
			Change
		Remove	
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			□Add
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			□Change

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Note:	ive date, if other than the date of filing:
f the recor	rd 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 led.
Dated	11/29 2023
	Rubin Journal Signature of aymember or authorized tepresentative of a member
	·
	Robin Jones Typed or printed name of signee

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From: Registered Agents Inc.

Fax: 8134365206

11/29/2023 08:09 14 PST

Ta: 18506176383