## L23000343681

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

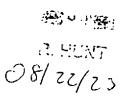
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Jeanne E. Balint Paralegal

(313) 225-7003 balint@butzel.com

150 West Jefferson Suite 100 Detroit, Michigan 48226 P: (313) 225-7000 F: (313) 225-7080 BUTZEL.COM

August 17, 2023

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32314

Re: Yassha LLC (I23000343681) - Amendment to the Articles of Organization

Dear Registration Section:

Enclosed for filing is a completed Amendment to the Articles of Organization of a Florida LLC form along with a check for the filing fee in the amount of \$25.00, payable to the Florida Department of State.

Also enclosed is a duplicate copy, please return via the enclosed self-addressed envelope.

Please contact my office if you have any questions or require additional information.

Sincerely, Butzel Long

deanne E. Balint

JEB/yhs:

## **COVER LETTER**

Registration Section

TO:

Divisi	ion of Cor	porations		
SUBJECT: _	<del></del>	Name of Lim	ited Liability Company	
The enclosed A	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return a	ll correspo	ndence concerning this matter	to the following:	
		Jeanne Balint		
			Name of Person	
		Butzel Long		
	Name of Limited Liability Company  and Articles of Amendment and fee(s) are submitted for filing.  In all correspondence concerning this matter to the following:    Jeanne Balint			
		150 West Jefferson, Ste 10	Name of Person  Firm/Company  100  Address  City/State and Zip Code  (to be used for future annual report notification)  call:  313 225-7003 at (	
			Address	on  O Code  annual report notification)  225-7003  Daytime Telephone Number  Daytime Telephone Number  S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)  reet Address: egistration Section ivision of Corporations he Centre of Tallahassee
		Detroit, MI 48226		
		1.17.401	City/State and Zip Code	
		<del></del>	to be used for future annual report no	tification)
For further info	ormation c			
Jeanne Balint				
	Name o	l'Person	Area Code Daytii	ne Telephone Number
Enclosed is a c	heck for th	ne following amount:		
■ \$25.00 Fil	ing Fee		Certified Copy	Certificate of Status & Certified Copy
				ection
Divi	sion of C	orporations	Division of Co	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Yassha LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on or Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Company Florida document number 1.23000343681	were filed on July 20.1	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility 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)  B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our record	Solution of the service of the servi
New Registered Office Address:		
New Registered Office Address.	Enter Florida stre	eet address
<del></del>	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and agrowisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my da provided 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

• 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	Dr. Shakir Hussein	345 Tamar CT	Add
		St. Augustine, FL 32095	□Remove
			□Change
			🗆 Add
			□Remove
		<del></del>	Change
			🗆 Add
			Remove
			□Change
			□Add
			□Remove
			Change
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		-	☐ Change
			□Add
			□Remove
			🗀 Change

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Mr. Bolit	August 17	2023			
Signature of a member or authorized representative of a member	tod "	·	<u> </u>		
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Filing Fee: \$25.00