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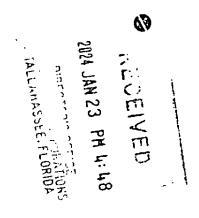
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COVER LETTER

	Registration S Division of Co						
SUBJECT		& ZAYNA LLC					
SOBJEC		Name of Lin	nited Liability Company				
The enclos	sed Articles of	Amendment and fee(s) are su	bmitted for filing.				
Please retu	ırıı all corresp	ondence concerning this matter	r to the following:				
		NAVEED H DOSSANI					
			Name of Person				
		ADVANTAGE ACCOUNT	NTING AND TAX LLC				
			Firm/Company			pace.	
		2700 N MILITARY TRA	IL, SUITE 200			#1 !	
			Address	·		:	
		BOCA RATON, FL 3343	1		i: Vice	(J)	•
			City/State and Zip Code		in Circles	圣	į
		naveed@advantage.cpa			四岁	3: 2	
		E-mail address:	to be used for future annual r	eport notification)	— · =		
For further	information o	oncerning this matter, please o	all:				
NAVEED	H DOSSANI		561 687	-6466			
	Name o	f Person	Area Code	Daytime Telephone Nur	nber		
Enclosed is	s a check for th	ne following amount:					
\$25.00	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is each	Certi	0 Filing Fee ficate of Sta fied Copy fonal copy is e	atus &	
	ailing Addres		Street Add				
	egistration S ivision of C		-	ion Section of Corporations			
	O. Box 632	•		tre of Tallahassee			
Ta	allahassee, F	FL 32314		Monroe Street Suit	a 910		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HADIKA & ZAYNA LLC			
(Name of the Limited Liability (A Florida Li	Company 1/3 It дозу арреат mited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Con	npany were filed on DE	CEMBER 22, 2023	_ and assigned
lorida document number L24000001069			
his amendment is submitted to amend the following:			
a. If amending name, <u>enter the new name of the limited</u>	d liability company he	<u>ге</u> :	
he new name must be distinguishable and contain the words "Limited	I Liability Company," the de	signation "LLC" or the abbre	
Enter new principal offices address, if applicable:			769F
Principal office address MUST BE A STREET ADDRES	<u> </u>	<u> </u>	<u>:</u>
		·	1 1 1 1
		70 TV 70 E (1171)	型
nter new mailing address, if applicable:		<u>`</u>	<u>()</u>
Mailing address MAY BE A POST OFFICE BOX		AT AT	20
. If amending the registered agent and/or registered of gent and/or the new registered office address here:	Mce address on our re	cords, <u>enter the name o</u>	f the new regis
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	da street address	
	· · · · · · · · · · · · · · · · · · ·	, Florida	
	Clty		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>			Type of Action
MGR	MOHAMMAD, SAQIB	11181 LAURI	EL WALK ROAD		□Add
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ffective date, if other than the date of filing:	(matica all	
an effective date is listed, the date must be specific and cannot be prior to	date of filing or more than 90 days after filing.)	Pursuant to 605.020
ote: If the date inserted in this block does not meet the applicable current's effective date on the Department of State's records.	le statutory titing requirements, this date w	ill not be listed a
record specifies a delayed effective date, but not an effective time is filed.	e, at 12:01 a.m. on the earlier of: (b) The	90th day after th
atedA,		
Malabir Variant		
Signature of a member of authorize	ed tenresentative of a member	

Filing Fee: \$25.00