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W. Love 71 3-29-24

COVER LETTER

Tallahassee, FL 32314

	Registration So Division of Co				
annuz		A PROPERTIES, LLC			
SUBJECT: Name of Limited Liability Company					
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		AYESHA A. BAIG			
			Name of Person		
		AYESHA PROPERTIES,	LLC		
			Firm Company		
		1741 FOUNTAINHEAD I	DRIVE		
		-	Address		
		LAKE MARY, FL 32746			
			City/State and Zip Code		
		aysha910@gmail.com			
			to be used for future annual report	notification)	
For furth	er information of	concerning this matter, please c	aH:		
AYESH	A BAIG		617 775-898	9	
	Name (of Person	Area Code Da	ytime Telephone Number	
Enclosed	l is a check for t	he following amount:			
□ \$2 5.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	LI \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres		Street Addres		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ()F

AYESHA PROPERTIES, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Floric	da Limited Liability Company)	,
The Articles of Organization for this Limited Liability	Company were filed on 02/01/2024	and assigned
Florida document number L24000060626	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lit	mited 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 ADD		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		ie name of the new <u>register</u>
Name of New Registered Agent:		·
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address	ŕ
	, Flor	rida
	City:	Zip Code

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 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

Title	<u>Name</u>	Address	Type of Action
AMBR	PARVEZ BAIG	1741 FOUNTAINHEAD DRIVE	<u></u> ■Add
		LAKE MARY, FL 32746	□Remove
			□ Change
			
			□Remove
			□Change
			🗆 Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			¬.,,

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: _ (optional) (If 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory tiling requirements, this date will not be listed as the document's effective date on the Department of State's records. If 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 record is filed. Dated_ II MARCH 2024 Amember or authorized representative of a member AYESHA BAIG Typed or printed name of signee

Filing Fee: \$25.00