L24000260613

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COVER LETTER

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TO: Registration Sec Division of Corp			
SUBJECT: DES	SOKY CAPITAL Name of Limi	LIMITED LIABI	LITY COMPANY
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	MoHA/	MED A. DESOKY Name of Person	
		Firm/Company	
	474 GRAND	Address PKWY	
	PALM COA	ST, FL 32164 City/State and Zip Code	
	Mae. d E-mail address: (t	lesoky @ gmail. Cor	eation)
For further information co	ncerning this matter, please ca	all:	
MOHAM EO	A. DESOKY Person	at (<u>917</u>) <u>& 6.0</u> Area Code Daytime	- S28/ Telephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	IX\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration So Division of Co P.O. Box 6327 Tallahassee, F.	ection orporations	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DESOKY CAPITAL LIMITED LIABILITY COMPANY

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on $06/07/2024$ and assigned		
Florida document number <u>L24000260613</u>	• ,		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
DESOKY CAPITAL, LLC The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	- C C - C - C - C - C - C - C - C - C -		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
primite distribution of the body	;+		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registered</u>		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Change

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(If an effective on Note: If the	date, if other than the date of filing:	
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlien day after the record is filed.	r of
Dated	October 23 rd . 2024.	
_	October 23 rd . 2024. Mohamed L. Desoky Signature of a member of authorized representative of a member	
	Mohamed 1. Desoky	

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