Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240002172113)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED ACCOUNTANTS LLC

Account Number : 120230000115

Phone : (813)773-4973

Fax Number : (813)440-4499

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

mail	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FOX FOOD MART LLC

Certificate of Status	0
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Page Count	01
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Corporate Filing Menu

Help

K. SALY

JUN 25 2024

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: FOX	Food Mart L Name of Lim	LC . lited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Mohammad	Name of Person	
- <u>. 5</u> 6.		Firm/Company	
	14927 Pine	Crest Pd Address	
	Info DUnia	33613 City/State and Zip Code CC. No.	Northern .
For further information co	oncerning this matter, please co		ication)
Mohammad H Name of	Person	at (<u>504</u>) <u>919 - C</u> Area Code Daytime	7455 Telephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$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 S		Street Address:	eio

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2024 JUN 24 AM 4: 26
TALLAHASSEE FINANT

Fax Food	Yark 110	**/	ASSEE FI ONL
(Name of the Lin	ited Liability Company	s it now appears on our records.)	
	(A Florida Limited Liab	Hty Company)	
The Articles of Organization for this Limited	Liability Company we	re filed on 06 - 07 - 2024	and assigned
Florida document number <u>L24000266</u>	793		C
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability	company here:	
The new name must be distinguishable and contain the	words "Limited Liability (ompany," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
	_		
:			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX</u>		
B. If amending the registered agent and/or	registered office add-	1000 OT 1111 OT 1111	
Fox Food Mart LLC. (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 66 - 67 - 2021 and assigned Florida document number L24000260793 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered agent and/or the new registered Agent: Name of New Registered Agent: Manamas Hasan New Registered Office Address: 14927 Pine Crest Ro Finer Florida Street address Finer Florida 33612			
Name of New Registered Agent:	Mohamman	Hasan	<u> </u>
New Registered Office Address:	14927 Pin	e Crest RO	
. 61 ii			
	Tampa	Florida <i>33</i>	6/3

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.

City

If Clanging 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

Title	Name	Address	Type of Action
MGR.	Ibrahim Hasan	4503 Old Orchard Dc	□Add
		Tampa, FC. 33618	XRemove
			-
MGR	Salahaldin Sarmiento	2606 Derby Glen Dr	
		Lutz, Fl. 33559	□Remove
			Change
			_ ∏Add
			_ □Remove
		7	C □ Œnge Ti
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		:	ERemove C
•			Change
-			∟□Add
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÷			_□Add _□Remove
			Change

if an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
· · · ·	
an e lote	ctive date, if other than the date of filing: (Optional) (Rective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
reco l is t	ord 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 filed.
atec	June 15 . 2024.
	Manager Hasan Signature of a member or authorized representative of a member Hasan Typed or printed name of signee
	Affair A factorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00