

L24000361415

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H24000282074 3)))



H240002820743ABCS

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To:

Division of Corporations
Fax Number : (350)617-6383

From:

Account Name : UNITED ACCOUNTANTS LLC
Account Number : I20230000115
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.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 5210 E FOWLER AVE LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

K. SALY

AUG-22-2024

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5210 E FOWLER AVE LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ARAFAT ASKER

Name of Person

Firm/Company

2426 VISCOUNT ROW

Address

ORLANDO, FL 32809

City/State and Zip Code

INFO@UNIACC.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ARAFAT ASKER

at (386)

956-0403

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

5210 E FOWLER AVE LLC

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

FILED
2024 AUG 22 AM 4:21
REC'D IN THE CLERK'S OFFICE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/19/2024 and assigned
Florida document number L24000361415.

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 "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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

City

Florida

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.

Arafat Asker
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

FILED
2024 AUG 22 AM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	ABED ASKER	2426 VISCOUNT ROW	<input type="checkbox"/> Add
		ORLANDO, FL 32809	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ABED ASKER	2426 VISCOUNT ROW	<input type="checkbox"/> Add
		ORLANDO, FL 32809	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ABED ASKER	2426 VISCOUNT ROW	<input type="checkbox"/> Add
		ORLANDO, FL 32809	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ARAFAT ASKER	2426 VISCOUNT ROW	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ALADIN ASKER	2426 VISCOUNT ROW	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ABED ASKER	2426 VISCOUNT ROW	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

FILED
AUG 22 2004
AM 4:21
TALLAHASSEE, FLORIDA

(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)

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.

Arapat Acker
Signature of a member or authorized representative of a member

Asaf Asker
Typed or printed name of signee

Filing Fee: \$25.00