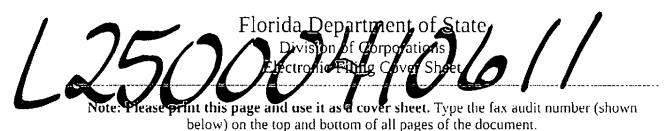
To: +18506176383 Sep 19, 2025-01:16 Page: 1/4 Fax: 18134365206



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name :

Account Number : I20090000081

Phone Fax Number

\*\*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 **BETTANEX LLC**

Certificate of Status	0
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## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**



**BETTANEX LLC** 

( <u>Name of the Limited Liability Compa</u> (A Florida Limited E	iny as it now appears on our re Liability Company)	ecords.) 1/00/6
The Articles of Organization for this Limited Liability Company	were filed on 09/08/25	and assigned
Florida document number L25000410611		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	fity 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)		
		<del>_</del>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
-		. Florida
N. D. C. H. M. C. L. W. L. W. D. W. D. W. L. W.	Ciŋ	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree		

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.

Sep 19, 2025-01:16 To: -18506176383 Page: 3/4 Fax: 18134365206

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>	Name	Address	Type of Action
AMBR	MUHAMMAD RAHEEL	324 S FINLEY RD UNIT 3P	
		LOMBARD, IL 60148	□Remove
			Change
			□Add
			Remove Change
			□ Add Remove
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Effective date, if other than the fan effective date is listed, the date must Note: If the date inserted in this blooment's effective date on the Defective date.	be specific and cannot be prior to date of filing or morek does not meet the applicable statutory filing	(optional) re than 90 days after filing.) Pursuant to 605.0207 (3)( requirements, this date will not be listed as the
record specifies a delayed effective d is filed.	date, but not an effective time, at 12:01 a.m. or	the earlier of: (b) The 90th day after the
Pated September 19	. 2025	
	Signature of a member or authorized representative o	f a member
	Nat Smith	
	Typed or printed name of signee	···

Filing Fee: \$25.00