114000144847

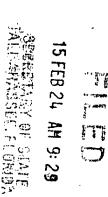
(Re	questor's Name)	
·	·	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	€#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
(50	ourners Humbery	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	·	

Office Use Only



000269707640

02/24/15--01029--008 **55.00



COVER LETTER

Division of Co			
Ananda	LLC		
	Name of Limi	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are subt	mitted for filing.	
Please return all corresp	ondence concerning this matter t	to the following:	
	Emira Zuckerman		
		Name of Person	
		Firm/Company	<u> </u>
	4420 NW 74 Ave		
		Address	
	Miami, FL 3166		
		City/State and Zip Code	
	emira.zuckerman@er	_	
	E-mail address: (to	o be used for future annual report notif	ication)
For further information	concerning this matter, please ca	11:	
Emira Zuckerman		786 229-6324	
Name	of Person		: 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ananda LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company w Florida document number <u>L14000144843</u> .		14 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty company here:	
Ananda Properties LLC		
The new name must be distinguishable and end with the words "Limited Liability	y Company," the designation "LLC" or the	e 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 offic registered agent and/or the new registered office address here:	ce address on our records, <u>ent</u> e	er the name of the new
Name of New Registered Agent:		
		ASSE THE COMMON
New Registered Office Address:	Enter Florida street address	20 M
		AR E T
	, Florida _ ,	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	6. C
I hereby accept the appointment as registered agent and agree		gree to comply with the
provisions of all statutes relative to the proper and complete pe accept the obligations of my position as registered agent as pro-		
being filed to merely reflect a change in the registered office ac		

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			<u>.</u>
			□ Add
			□ Remove
			
			Add
			☐ Remove

			Add
			Remove
			· · · · · · · · · · · · · · · · · · ·
			□ Add
			Remove
			Part was a second distribution of the second dis
			□ Add
		•	□ Remove

ffective date, if other than the date of filing:	eccipt or filed date and cannot be more than 90 days after
ated,	·
Ellucor Tucker	wan
Signature of a member	er or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

