10600069409

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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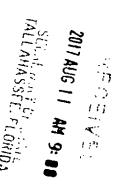




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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1,

AK.LLC		
(Name of the Limited Liabit (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability (Company were filed on 6/12/2006	and assigned
Florida document number L06000069409	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited 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 ADDR	(ESS)	
		AUC
Enter new mailing address, if applicable:		0
(Mailing address MAY BE A POST OFFICE BOX)		177
7		
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, <u>ente</u> ress bere:	r the name of the ne
	i con nove.	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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.

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	Membe

<u>Title</u>	Name	Address	Type of Action
MGR	Hirapara Kishor	8058 W. Hwy 98	Add
		Pensacola, FL 32506	☐ Add Remove ☐ Change
			☐ Change
MGR	Kokila Ramani	8058 W. Hwy 98	Add
		Pensacola, FL 32506	☐ Remove
			Change
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ffective date,	if other than the da	te of filing:		ı	(optional)		
an effective date	is listed, the date must be	specific and cannot be	prior to date of filing	or more than 90 day	s after filing) P	ursuant to 605.	.020
<u>ote:</u> If the dat	e inserted in this block ctive date on the Depar	does not meet the a	pplicable statutory	filing requirement	s, this date wi	II not be liste	:d £
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Filing Fee: \$25.00