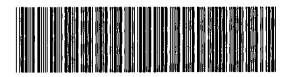
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K. SALY EXAMINER OCT 24 2011



September 27, 2011

DAMODAR, LLC GYANENDRA K JOSHI 13830 SAXON LAKE DR. JACKSONVILLE, FL 32225

SUBJECT: DAMODAR, LLC Ref. Number: L02000030744

We have received your document for DAMODAR, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Letter Number: 911A00022247

Karen A Saly Regulatory Specialist II

www.sunbiz.org

Division of Compositions DO DOV 6297 Pollohogon Florido 2921

# **COVER LETTER**

Division of Corporations
SUBJECT: DAMO DAR, 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:
GYANEN DRA K. JOSHI Name of Person
DAMODAR, LLC Firm/Company
13830 SAXON LAKE DRIVE
TACKSONVILLE, FL 32225  City/State and Zip Code  ijoshict@hotmail.com.  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SYAN JOSHI at (201) 247 - 2100  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Solution} \text{Solution} \text{Filing Fee & Solution} \text{Solution} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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

11 OCT 21 PM 4: 20

DAMODAR 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 November 18, 2002 and assigned Florida document number 10200030744.

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 end with the words "Li"L.L.C."	mited Liability Comp	pany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		NA
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SAKON LAKE DRIVE SONVILLE, FL 32225
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		our records, enter the name of the new
Name of New Registered Agent:  New Registered Office Address:	City	Inter Florida street address, Florida Zip Code
	e <del>,</del>	=-p =====

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 608, 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.

No Change
If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

MGRM = Managing Member **Type of Action** Address Title Name MGRM SUSHILA JOSHI Remove ☐ Remove Add Remove ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated SEPTEMBER Signature of a member or authorized representative of a member GYAN JOSHI
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00