

LD2000031261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

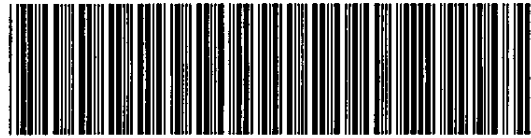
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600080285026

10/23/06--01022--012 **25.00

FILED
06 OCT 23 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan OCT 24 2006

The Rajyaguru & Sons, L.L.C.
505 W. Vine Street, #301
Kissimmee, FL 34741

October 19, 2006

Florida Department of State
Division of Corporation
P O Box 6327
Tallahassee, FL 32314

RE: Address change, Document # L02000031251

Dear Sir / Madam,

Please update your file with our new location as listed under.

Old Location: 1200 N. Central Avenue, #213, Kissimmee, FL 34741

New Location: 505 W. Vine Street, #301, Kissimmee, FL 34741

Should you need any other information, please contact us.

Sincerely,

A handwritten signature in black ink, appearing to read 'V. L. Rajyaguru', with a stylized flourish at the end.

V. L. Rajyaguru, MD

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: The Rajyaguru & SONS L.L.C.
2. The mailing address of the limited liability company is: 505 W. Vine Street #301
Kissimmee, FL 34741
3. Date of filing/registration in Florida: Dec. 19, 2002
4. Document number: L02000031261

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Your Capital Connection, Inc.
Name
417 E. Virginia St. Suite 1
Address
Tallahassee, FL 32302
City, State and Zip

6. The name and address of the new registered agent and/or office:

Kalpna Thanki
Name
3631 Devereaux Ct.
Florida street address (P.O. Box NOT acceptable)
Orlando FL 32837
City, State and Zip

FILED
06 OCT 23 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature] 10/19/06
(Signature of a member or authorized representative of a member)

V. L. RAJYAGURU (President) (Printed or typed name of signer) (321) 624-6464 Phone #

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.

Kalpna Thanki
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00