## h03000010971

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	; #)
PICK-UP		MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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	Office Use Onl	ý

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A. BUTLER SEP 14 2022

## **COVER LETTER**

TO:	<b>Registration Section</b>
	Division of Corporations

RF ALTAMONTE REAL ESTATE, LLC SUBJECT:

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:

NANDKISHORE RANADIVE

Name of Person

Firm/Company

9213 BENTLEY PARK CIRCLE

Address

ORLANDO, FL 32819

City/State and Zip Code

KISHORERANADIVE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NANDKISHORE RANADIVE

Name of Person

321 946-0140 at (\_\_\_\_\_) Area Code Day

Area Code Daytime 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) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF		
ARTICLES OF C	O DRGANIZATION DF	FILED
RF ALTAMONTE REAL ESTATE, LLC ( <u>Name of the Limited Liability Comp</u> : (A Florida Limited	nay as it now appears on our re Liability Company)	ETTED 2022 JUN 23 PM 6: 30 CCORD DE STATE
The Articles of Organization for this Limited Liability Company Florida document number <u>L03000010971</u> .	were filed on $\frac{03/26/2003}{2}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u> N/A The new name must be distinguishable and contain the words "Limited Liabi		"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: ( <u>Principal office address MUST_BE A STREET ADDRESS)</u>	N/A	
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	N/A	
<b>B.</b> If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>e</u>	enter the name of the new registere
Name of New Registered Agent: N/A		
New Registered Office Address:	Enter Florida street a	uddress

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.

City

, Florida \_

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>op removed from our records</u>:

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	Name	Address	Type of Action	
			🗆 Add	
			Change	
			🗆 Add	
			🗆 Remove	
			□Change	
			🗆 Add	
			🗌 Remove	
			Change	
		·····	🗆 Add	
			□Change	
			🗆 Add	
			Remove	
			Change	
			🗋 Add	
			🗆 Remove	

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**D.** If amending any other information, enter change(s) here: (*Attach additional sheets, if necessary.*) ADD TWO MORE MEMBERS TO THE LIMITED LIABILITY COMPANY AS FOLLOWS:

ISHA RANADIVE -MEMBER; 9213 BENTLEY PARK CIRCLE, ORLANDO, FL 32819

DHRUV RANADIVE-MEMBER, 9213 BENTLEY PARK CIRCLE, ORLANDO, FL 32819

ve date, if other than the date of filing: 6-14-2022 (optional)

E. Effective date, if other than the date of filing: 6-14-2022 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

JUNE 10 Dated	2022	
	Andin	
	Signature of a member or authorized representative of a mem	ber

NANDKISHORE RANADIVE

Typed or printed name of signee