

L04000013165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

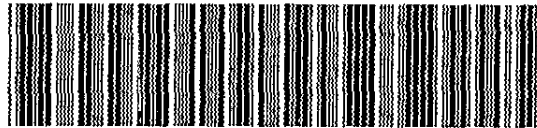
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300036254873

05/14/04--01029--005 \*\*25.00

FILED

04 MAY 14 PM 3:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5/29/04  
JMS

5/10/2004

From,  
MAHUL R. PATEL  
1471 COURT STREET  
CLEARWATER  
FL - 33756.

JO,

FLORIDA DEPT OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE  
FL - 32314

KIND ATTENTION : MR IRVING

Dear sir:

As per our Conversation on 5/4/04, I'd like to thank you for sending me the charge of registered agent & LLC form. I am Enclosing the forms alongwith cheque no 1120 dtd 5/10/2004 payable to "Florida Dept. of state" toward the fee.

I request you to please make the charges to my address for registered agent & LLC.

Thanking you & please do acknowledge the charges at the new address.

Mahul R. Patel

FILED  
04 MAY 14 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: SWAMI HOSPITALITY, L.L.C.
2. The mailing address of the limited liability company is : 1471 Court Street  
Clearwater, FL - 33756

February 18, 2004  
3. Date of filing/registration in Florida

L04000013165  
4. Document number

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

MAHUL R. PATEL / ~~SHREYA M. PATEL~~  
Name  
3232 ALCOTT AVENUE  
Address  
PLANT CITY, FL - 33567  
City, State and Zip

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

MAHUL R. PATEL  
Name  
1471 COURT STREET  
Florida street address (P.O. Box NOT acceptable)  
CLEARWATER, FL - 33756  
City, State and Zip

**FILED**  
04 MAY 14 PM 3:59  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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.

MR Patel  
(Signature of a member or authorized representative of a member)

MAHUL R. PATEL  
(Printed or typed name of signee)

*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.*

MR Patel  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314