

104000021398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 16 2017

J. SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BABASAH, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

USHA CHANDRAHASA
Name of Person

BABASAH, LLC
Firm/Company

3400 TAMIAMI TRAIL, SUITE 201
Address

PORT CHARLOTTE, FL 33952
City/State and Zip Code

mahendrasah@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

USHA CHANDRAHASA at (941) 743-2277
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

2. (a) 3400 TAMiami TRAIL

(b) 1328 ALPINIA ROAD

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

SUITE 201

NORTH PORT, FL 34288

PORT CHARLOTTE, FL 33952

03/19/2004

L04000021398

3. Date of filing/registration in Florida

4. Document number

5. (a) USHA CHANDRAHASA

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1328 ALPINIA ROAD

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

NORTH PORT FL 34288

(b) BALA MAHENDRASAH

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

17 OCT 13 AM 7:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature of a member or authorized representative of a member

USHA CHANDRAHASA

Printed or typed name of signee

Signature of Registered Agent