

L04000030956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

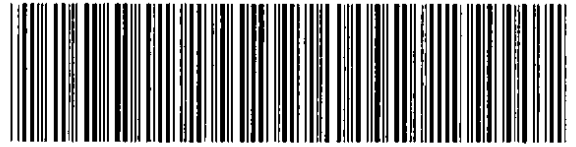
(Business Entity Name)

(Document Number)

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07/05/23--01039--022 **43.75

2023 JUL -5 AM 8:15

A. PARISHANI

SEP - 5 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RAJ HOTELS, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LATA SHINTRE
Name of Person
RAJ HOTELS, LLC
Firm/Company
8765 WATERCREST CIRCLE EAST
Address
PARKLAND, FL 33076
City/State and Zip Code
LATASHINTRE @ AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LATA SHINTRE at (954) 482-3740
Name of Person 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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

2023 JUL -5 AM 8:15

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

RAJ HOTELS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2023 JUL -5 AM 8:15

The Articles of Organization for this Limited Liability Company were filed on 4/22/2024 and assigned
Florida document number LC4000030956.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NOT APPLICABLE

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

NOT APPLICABLE

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NOT APPLICABLE

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NOT APPLICABLE

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

2023-11-05 AM 8:15

2023 JUN -5 AM 8:15

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

1) SUBJECT - AMENDING OFFICERS

a) Remove → Manager - Nirmla Motwani

Address 1158 Peregrine Way
Weston, FL 33327

b) Add → Manager - Lata Shintre

Address - 5765 Watercrest Circle E
Parkland, FL 33076

2) ASSIGNMENT OF MEMBERSHIP INTEREST

"Please see document attached".

Nirmla Motwani, an individual, hereby assigns,
conveys, transfers, unto Lata Shintre, with respect
to Raj Motels LLC a Florida LLC, all and the
entirety of one hundred percent (100%) membership interest
in the company, free and clear of all encumbrances.

E. Effective date, if other than the date of filing: June 25th 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)

Note: 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.

Dated

5/20/23

Signature of a member or authorized representative of a member

LATA SHINTRE

Typed or printed name of signee

Filing Fee: \$25.00