

L04000075689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

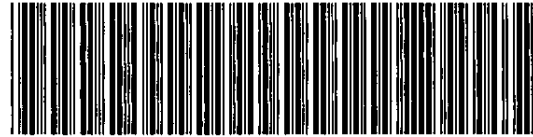
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T. CLINE

OCT - 2 2012

EXAMINED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ashka 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:

Ashish Stephen
Name of Person

Ashka LLC
Firm/Company

13809 CR 455, # 104
Address

Clermont-FL-34711
City/State and Zip Code

Ashkallc@earthlink.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashish Stephen at (407) 347-8908
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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ASHKA LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/19/2004 and assigned
Florida document number L 04000075689.

This amendment is submitted to amend the following:

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

N/A

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

Enter new principal offices address, if applicable:

13809 CR 455, # 104

(Principal office address MUST BE A STREET ADDRESS)

CLERMONT-FL-34711

Enter new mailing address, if applicable:

13809 CR 455, # 104

(Mailing address MAY BE A POST OFFICE BOX)

CLERMONT-FL-34711

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:

ASHISH STEPHEN

New Registered Office Address:

13809 CR 455, # 104

Enter Florida street address

CLERMONT

Florida

34711

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 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.

A. Stephen
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	SHILPA STEPHEN	832 CURA COURT OAKLAND-FL-34787	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ASHISH STEPHEN	13809 CR 455, # 104 CLERMONT-FL-34711	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

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

Dated SEPTEMBER 24, 2012

Shilpa A. Stephen
Signature of a member or authorized representative of a member
SHILPA STEPHEN ASHISH STEPHEN
(REMOVE) Typed or printed name of signee (ADD)