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Account Number : 075350000514 Phone : (727)442-1200 Fax Number : (727)443-5829

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MADHU LLC

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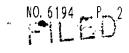
C. LEWIS NOV 2 2 2010

**EXAMINER** 

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2010 NOV 19 AM 7: 83 MECRETAIN OF STATE TALLAHASSEE, FLORIDA

	MADHU LLC		
( <u>Name of the Limited Liabili</u> (A Florida	ity Company as it now app a Limited Liability Company	cars on our records.)	
(*** 1-1-1-1-1	,,	•	
The Articles of Organization for this Limited Liability	Company were filed on _	February 7, 2005	and assigned
Florida document number L05000012703	<del></del> '		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company b	iere:	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Con	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			····
(Principal office address MUST BE A STREET ADE	<u>PRESS)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office ad		our records, enter the	name of the new
Name of New Registered Agent:			·
New Registered Office Address:			
	1	Enter Florida street addre	75
		, Florida	<u> </u>
	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.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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:

MGRM = Managing Member Title <u>Name</u> <u>Address</u> Type of Action MGRM SHAILA CHOKSI 2420 W. Carroll Place Tampa, El. 33612 ☐ Add 📝 Remove Remove Remove □ Add ☐ Remove ∐Add □ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 17 th Nov. Dated 2010 Signature of a member or authorized representative of a member JAYENDRA C. CHOKSI, Member Typed or printed name of signes යා යා Page 2 of 2

Filling Fee: \$25.00