## L050W015444

(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



700195669037

02/23/11--01012--015 \*\*25.00

11 FEB 23 AM 10: 12

B. KOHR

FEB 25 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co		.•	24.5
SUBJECT:	Pa	ago, LLC	1/4
SUBJECT:		ited Liability Company	23
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.	1 FEB 23 MIO.
Please return all corresp	ondence concerning this matter	to the following:	
		Dawn Tottel	· · · · · · · · · · · · · · · · · · ·
		Name of Person	
		Paago, LLC	·
		Firm/Company	
		1623 SW 1st Ave	
	- "	Address	· <del>····</del>
		Ocala, FL 34471	
		City/State and Zip Code	
		dtottel@aol.com	
	E-mail address: (	to be used for future annual report notific	ation)
For further information	concerning this matter, please of	eall:	
1	Dawn Tottel	_at (_352_)	<b>'</b> 32-9844
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	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MATI	INC ADDRESS.	CTDEET/COUDIED ADDRESS.	

MAILING ADDRESS:

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

## STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pagga IIC

TEBES MID: 12

	raayu, LLC		/.
(Name of the Limited Liabil	ity Company as it now appear a Limited Liability Company)	rs on our records.)	<i>\</i> >
(A Florid	a Limited Liability Company)		
The Articles of Organization for this Limited Liability	Company were filed on	2/15/2005	and assigned
	Company were med on		and assigned
Florida document numberL05000015444	<u> </u>		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the li</u>	mited liability company her	<u>·e</u> :	
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Compa	iny," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
		·	-
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	<del></del> -		
	•		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on o ldress here:	our records, <u>enter th</u>	e name of the new
Name of Name Products I Associa			
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street addre	SS
		, 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 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 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 **Type of Action** Title Name Address MGMR KGR, LLC 11265 Bridgehouse Rd. ☐ Add Windermere, FL 34786 ∇ Remove Bhavas, LLC MGMR 6601 S. Magnolia Ave. ☐ Add Ocala El 34476 ✓ Remove MGMR Kuchakulla N. Reddy 1623 SW 1st Ave. ✓ Add ☐ Remove Ocala, FL 34471 Nagender A. Reddy MGMR 6601 S. Magnolia Ave. ✓ Add Ocala FL 34471 Remove  $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 January 1 Signature of a member or authorized representative of a member K. N. R. BDDY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00