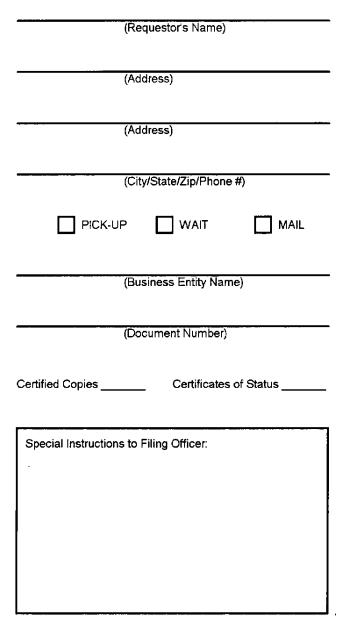
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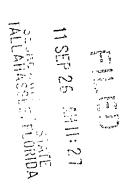


Office Use Only



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B. BOSTICK

SEP 2 8 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: KEDAR, LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	,
Please return all correspondence concerning this matter to the following:	
GYANENDRA K. JOSHI Name of Person	
KEDAR, LLC Finn/Company	
13830 SAYON LAKE ROAD Address	-
JACKSONVILLE, FL 32225 City/State and Zip Code	IN SEP 2
<u>ijoshicta hotmail. (cm</u> E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	TONE 2
GYAN JOSHI at (201) 247- 2100 (Cell' Name of Person Area Code & Daytime Telephone Number) A
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	ate of Status &

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

(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 Compar Florida document number <u>LØ5ØØØØ21482</u> .	ny were filed on MARCH 3, 2005 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and end with the words "Lin"L.L.C."	imited Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13830 SAYON LAKE DRIVE JACKSONVILLE, FL 32225	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address have a Name of New Registered Agent: New Registered Office Address:	Enter Florida street address , Florida	
	City P Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

VENAD

110

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 Address** Title <u>Name</u> 13030 SAYON LAKE DRIVE TACKSONVILLE, FL 32225 SUSHILA JOSHI MGRM Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) <u>20</u>, <u>2011</u>. Dated SEPTEMBER Signature of a member or authorized representative of a member GYAN JOSH Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00