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05/19/08--01021--005 \*\*25.00

2008 MAY 19 PM 1: 02
SECRETARY OF STATE
ANALYSEFF, FLORIDA

T. CLINE

MAY 20 2008

**EXAMINER** 

## **COVER LETTER**

Division of Co	rporations				
SUBJECT: DRE	AMS MAN (Name of Lin	A GEMENT, LLC mited Liability Company)			
	f Amendment and fee(s) are su				
	BHITTI	(Name of Person)			
		MANA GEMENT, (Firm/Company)	LLC		
	2520	M. 50TH. ST. (Address)			
	TAMPA	FL 334/9 (City/State and Zip Code)	<del> </del>	d. 2	
For further information	concerning this matter, please	call:		DOR HA	-71
BHITTI (Name	PATEL of Person)	at (727) 6 56 - 7 (Area Code & Daytime 7	) & 6 ) Felephone Number)	2008 MAY 19 PM 1: 02 SECRETARY OF STATE TALLAHASSEE, FLORIO	
Enclosed is a check for	the following amount:			1: 02 STATE LORID/	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Co (additional of	of Status &	

### **MAILING ADDRESS:**

TO:

**Registration Section** 

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	HAGEMENT, LL Liability Company as it now appears	on our records.)		
(A	Florida Limited Liability Company)			
The Articles of Organization for this Limited Lin		2/5/05	and assigned	d
This amendment is submitted to amend the follo.	owing:			
A. If amending name, enter the new name of	the limited liability company here	;		
The new name must be distinguishable and end with "L.L.C."  B. If amending the registered agent and/o			2006 TAL	
registered agent and/or the new registered of	ir registered office address on of fice address here:	ar records, <u>enter</u>	19 ARY SSE	
Name of New Registered Agent:	BHITT, PATE	=	PM 1:0	
New Registered Office Address:	2520 N. 50	DTH. ST. ter Florida street ad	Idress)	
	JAMPA (City)	, Florida	33619 (Zip Code)	<del></del>

#### 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)

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 <u>Title</u> <u>Name</u> PATEL SAPNA 2626 E BAYISLEDRISE ☐ Add Marin Remove ST. PETERSBURG FL 33705 □ Add MERM DATEL AMAN **⊠** Remove AS ABOVE MGRM PATEL CHRAG \_ □Add Remove PATEL BHITTI 2520 M.50TH. ST MGRM SIMH DEVANG marin Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ADDRESS CHANGE: (IN ALL PLACES) FROM 1 2520 N. 50TH.ST. 2626 E. BAY ISLE DR. SE ST PETERSBURG FL 33705 (NEW ADDRESS FOR MAILING) Signature of a member or authorized representative of a member BHITTI PATEL
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00