

06.000013322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

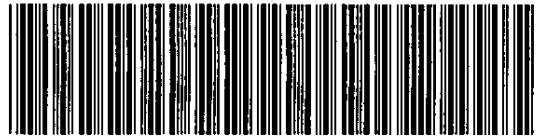
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JUN 19 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAWATDEE NAAN-JAI, L.L.C.
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:

Songsatja Srichareon
Name of Person

SAWATDEE NAAN-JAI, L.L.C.
Firm/Company

125 A FIRST ST. SE.
Address

FORT WALTON BEACH, FL 32548
City/State and Zip Code

bangkokcleaners@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KARAWA SRICHAREON at (850) 243 4556
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

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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**

SAWATDEE NAAN-JAI, L.L.C.

(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 02/06/2006 and assigned
Florida document number L06000013322

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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

125 A FIRST ST. SE.
FORT WALTON BEACH, FL 32548

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

125 A FIRST ST. SE.
FORT WALTON BEACH, FL 32548

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:

Songsatja Srichareon

New Registered Office Address:

218 BAKER AVE

Enter Florida street address

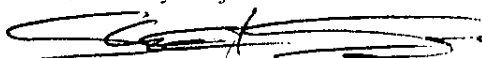
FORT WALTON BEACH, Florida 32548

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

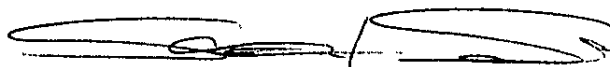
• If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SONGSATJA SRICHAREON	218 Baker Ave NW FORT WALTON BEACH FL 32548	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	KARAWA SRICHAREON	218 Baker Ave NW FORT WALTON BEACH FL 32548	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	SARODD PUNPEN G	100 Memorial Pkwy SW. FORT WALTON BEACH FL 32548	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	SAMRAN SRICHAREON	218 Baker Ave NW Fort Walton Beach FL 32548	<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

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

Dated 06-15, 2009.



Signature of a member or authorized representative of a member

SONGSATJA SRICHAREON

Typed or printed name of signee

SECRETARY OF THE
 TALLAHASSEE
 JUN 16 10 53 AM '09
 FILED