

LV600000 85120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

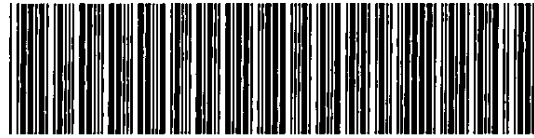
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800094413898

03/29/07--01035--018 **30.00

FILED
2007 MAR 29 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LV6-85120
AR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHREEHARI KRUPA, 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:

Hitesh Patel

(Name of Person)

SHREEHARI KRUPA, LLC.

(Firm/Company)

4387 SW State Road 47

(Address)

LAKE CITY, FL 32024

(City/State and Zip Code)

For further information concerning this matter, please call:

Nilesh Patel

(Name of Person)

at (386) 752 - 1987

(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

2001 MAR 29 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SHREEHARI KRUPA, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 8/28/2006 and assigned document number L06000085120.

SECOND: This amendment is submitted to amend the following:

--> ARTICLE II -The Principal Office Address & The Mailing Address:;

--> ARTICLE III - Registered Agent's Address:;

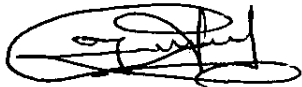
--> ARTICLE IV- Manager(s) or Managing Member(s)'s Address:

**** The Above three Addresses Should be the SAME and IS:**

THE NEW ADDRESS : 4387 SW State Road 47, LAKE CITY, FL 32024

Instead Of THE OLD ADDRESS : 1452 SW 18 PL, GAINESVILLE, FL 32608

Dated March 27th, 2007.



Signature of a member or authorized representative of a member

HITESH PATEL

Typed or printed name of signee

Filing Fee: \$25.00

FILED
2007 MAR 28 AM 9:54
TALLAHASSEE, FLORIDA
SECRETARY OF STATE