L07000002768

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, SECRETARY OF STATES TALLAHASSEE, FLORIDA

J. SAULSBERRY EXAMINER MAY 9 2011

COVER LETTER

то:	Registration S Division of Co						
SUBJE	СТ:		vestments, LLC				
		Name of Limi	ited Liability Company				
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please r	eturn all correspo	ondence concerning this matter	to the following:				
Chitra Kuthiala							
Name of Person							
Firm/Company							
2961 Bernice Drive						2(
Address						2011 MAY -4	-40
	Jacksonville, Florida 32257						anness.
			City/State and Zip Code				
		E-mail address: (nkuthiala@gmail.com to be used for future annual report no	gmail.com future annual report notification)		PH 1: 17	E A SHE
For furt	her information o	concerning this matter, please o	call:		LORIDA	=	
	Aa	alok Kuthiala	at (_904_)	641-2522			
Name of Person		Area Code & Dayti	me Telephone Number	•			
Enclose	d is a check for t	he following amount:					
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	ed) Certified	te of Stat		ed)
MAILING ADDRESS:		STREET/COU	RIER ADDRESS:				

Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Registration Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

<u>بر</u> ,

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Guddi Invest	ments, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now apper Liability Company	ears on our recor	<u>'ds.</u>)		
The Articles of Organization for this Limited Liability Company	were filed on	January 9,	2007 aı	nd assig	gned
Florida document number L0700002768					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company h	ere:			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Com	pany," the design	ation "LLC" o	r the ab	breviation
Enter new principal offices address, if applicable:	•		AZ SE	201	
• •	,		- E E	*	
(Principal office address MUST BE A STREET ADDRESS)	;	,	· · · · · · · · · · · · · · · · · · ·	<u> </u>	4 Mayora
	***		SEC	<u> </u>	gar-n-m
			F.	P	∯jeĝi.} ≧romeş
Enter new mailing address, if applicable:			SE		To State of
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	<u> </u>	
		_	4 41		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records,	enter the na	me of	the nev
Name of New Registered Agent:		<u></u>			
New Registered Office Address:			4 7		
	Enter Florida street address				
	<i>C</i> ''	, Flor		<u> </u>	
	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 **Title Address** Type of Action Name Aalok Kuthiala **MGRM** 11735 Kings Mountain Way Jacksonville, Florida_32256___ ✓ Add

Remove ☐ Add ☐ Remove ☐ Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ____ March 15 how kell Club Kulul Signature of a member or authorized representative of a member Aalok Kuthiala Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00