Florida Department of State

Division of Corporations Public Access System

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(((H08000134345 3)))



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To :

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : UPCHURCH, BAILEY & UPCHURCH, P.A.

Account Number : 075350000207 Phone : (904)829-9066

Fax Number : (904)825-4862

C AMND/RESTATE/CORRECT OR M/MG RESIGN

MAHA BALI, LLC

Certificate of Status	1
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Corporate Filing Menu

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5/21/2008

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	MAHA BALI, LLC			
(Name of the Limiter	Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited L	,	July 24, 2007	and assigned	
Florida document number <u>L0700007623</u>	<u>3 </u>			
This amendment is submitted to amend the foll	lowing:			
A. If amending name, enter the new name of	f the limited liability company her	<u>ne</u> :	OS M	<u>.</u>
The new name must be distinguishable and end wind.L.C."	th the words "Limited Liability Comp	any," the designation "	LLC" or the abbreviation	5
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter :</u>	the name of the new	严 8: 33
Name of New Registered Agent:	Ashish D. Mehta	**	<u> </u>	
New Registered Office Address: 4010-104 U.S. Highway 1 South (Enter Florida street address)				
	St. Augustine	. Florida	32086	
	(City)	,v.,	(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)

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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:

	Manager = Managing Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Uma Nayyar	St. Augustine, Florida 32084	Add ✓ Remove
MGR_	Sangita Mehta	606 North Ponce de Leon Boulevard St. Augustine, Florida 32084 MGR	Add Remove
MGR_	Ashish D. Mehta	4010-104 U.S. Highway 1 South St. Augustine, Florida 32086	Add Remove
			OR MAY 21 MM 8:33 RESTRICT OF STATE RETRICT OF
weeks			Add Remove
D. If an	nending any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	
	ARTICLE II (Principal Office):		
		ddress of the Company's principal office is	
	4010-104 U.S. Highway 1 South,	St. Augustine, Florida 32066.	
Dated	may 21.	2008	
	Sangila A.	melula	<u></u>
	Signature of a men	nber or authorized representative of a member Sangita Mehta	
	Ty	ped or printed name of signee	

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