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SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE

JAN 2.2 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: SURYA	IN LLC		
	(Name of Lin	nited Liability Company)	
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.	•
Please return all corresp	ondence concerning this matter	r to the following:	
	AJIT V HANSALIA		
		(Name of Person)	
		(Firm/Company)	
		(t init company)	
	9497 SOUTHERN G		
		(Address)	
	ALTAMONTE SPRI	NGS FL 32714	
	· · · · · · · · · · · · · · · · · · ·	(City/State and Zip Code)	70.0
For further information	concerning this matter, please o	call:	CAET THE
	, F		55K 8
AJIT V HANSALIA	,	at (321) 438 5314	EFO -P III
(Name	of Person)	(Area Code & Daytime	ZOON JAN 18 PH 12: 36 SECRETARY OF STATE ALL AHASSEE, FLORID Telephone Number)
Enclosed is a check for t	the following amount:		<u> </u>
\$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

SURYA IN LLC		
(Name of the Limited Li (A Fl	ability Company as it now appears on our re orida Limited Liability Company)	ecords.
The Articles of Organization for this Limited Liab	ility Company were filed on <u>09-11-2007</u>	and assigned
Florida document number <u>L0700092934</u>		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
SURYA INNOVATIONS LLC		
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the de	signation "LLC" or the abbreviation
	•	3.0
B. If amending the registered agent and/or		
registered agent and/or the new registered offic	e address nere:	
	·	SSE SSE
		in 1 1 1
Name of New Registered Agent:		
New Registered Office Address:		2: 3 ORI
New Registered Office Rudiess.	(Enter Florid	la street address)
	,]	Florida
•	(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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	GAUTAM GHETIA	500 ADAMS LANE APT.# 10N NORTH BRUNSWICK NJ 08902	Add Remove
			Add Remove
			Add Remove
	·····		Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter change(S) here: (Attach additional sheets, if necessary), CRETARY OF S	2000 JAN 18 PM
——————————————————————————————————————	JARY 9TH , 2008	ORIE A	
Dated 57 1140		r authorized representative of a member	
	AJIT V HANSALIA		

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00