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SECRETARY OF STATE

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T. CLINE
DEC - 5 2011
EXAMINER

November 18, 2011

VIJAY ZAVERI 3661 S. MIAMI AVE #409 MIAMI, FL 33133

SUBJECT: M.G.GARALA, LLC Ref. Number: L07000119882

We have received your document for M.G.GARALA, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 311A00026166

2011 DEC -2 ANICY OF

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: M. G. GARALA 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:
Vijay Zaveri, MD Name of Person
366/5. Miami Ave #409 Address
Miami FL 33/33 City/State and Zip Code Jnieda O South Noridaent, Com E-mail address: (to be used for future arrhual report notification)
For further information concerning this matter, please call:
July Niedo at 305 854-597/ Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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**

M_{\star}	6. 61	ARALA	LLC			
(Name of the Limited I	Florida Limited Lia	hility Company)				
The Articles of Organization for this Limited Lia Florida document number <u>LD7 00</u>	bility Company w 601! 98	ere filed on 7444	AHAGSEE,	F し _ and as	ssigned	
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liabili	ty company here:				
The new name must be distinguishable and end with "L.L.C."		l Liability Company,"	the designation "LLC	or the	abbrevi	ation
Enter new principal offices address, if applica	,		•	<u>इस.</u>		_
(Principal office address MUST BE A STREET	ADDRESS)				<u>=</u>	
Enter new mailing address, if applicable:				RETARY SHESSER	DEC -2	All house the second se
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>				烈	\$ T
				OR A	8	7
	•			9m	ල්ව ලේව	_
B. If amending the registered agent and/or registered agent and/or the new registered offi	ce address here:					<u>new</u>
Name of New Registered Agent:	VITAY	ZAVER S. Mia	<u>^/</u>	11		_
New Registered Office Address:	3661.	S. Mia.	mi Aul 1	#40	29	
	Miam		, Florida <u> </u>		<u>ら</u>	
	•	City		Zip Coa	te	
New Registered Agent's Signature, if changing Re	gistered 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,

Page 1 of 2

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 Type of Action Title Name **Address** Remove Remove Add Remove ___Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00