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OCT - 8 2008

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp		
SUBJECT:	Pai Bhandaar LLC. (Name of Limited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	
Please return all correspor	ndence concerning this matter to the following:	
	Paddy Raju (Name of Person) Sai Bharlage LLC. (Firm/Company)	
	Sai Bharlage LLC. (Firm/Company)	
	(PR) P.O. BOX 590086 (Address)	
	Orlando, FL 32859 (City/State and Zip Code)	
For further information co	oncerning this matter, please call:	
Pady	pf Person) at (407) 694-3695 (Area Code & Daytime Telephone Number)	
(Name o	(Area Code & Daytime Telephone Number)	2008
Enclosed is a check for the		e T
\$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)	E M

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

Sai Bhandage L	LC.
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed onand assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	lity company here:
The new name must be distinguishable and end with the words "Limit"L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	12815 Water Point Blods,
(Principal office address MUST BE A STREET ADDRESS)	Windermere, FL 34786
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.o-Bo X 590086 Orlando, FL 32859
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	(Enter Florida street address)
New Registered Agent's Signature, if changing Registered Agent:	(City) HZIP CEARY SSEE.
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	ete performance of my duties, and I am tomiliar with and rovided for in Chapter 608, F.S. Or, if this document is

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

<u>Title</u>	Name Tagadeesh R.	Address	Type of Action
mbr_	Name Jagadeesh R Nandimandalam	P.O.BOX 590086 Oclando, FL	Add Remove
MBR	Smitha veerapalli		Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	ling any other information, enter chang	_	ecessary.)
	Pady Raju Jagadeeth R. Nancima	70 % v	2008 OCT SECRETAR
 Dated	September 30th, 20	208	7 AM IO: 05
	Signature of a member	r or authorized representative of a member	