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PICK-UP	☐ WAIT ☐ MA	AIL .
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Certified Copies	_ Certificates of Status _	
Special instructions to	Filing Officer:	
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Office Use Only



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T. HAMPTON

AUG - 6 2010

EXAMINER

COVER LETTER

Registration Section

. :	Kiran's B	roperty L.L.C	•		
SUBJECT:		ed Liability Compar			•
	Name of Linns	ed Liability Compar	ıy	•	•
The enclosed Articles	of Amendment and fee(s) are subr	nitted for filing.			
Please return all corre	spondence concerning this matter t	to the following:	•		
		naramatee Ran			
•		Name of Person			
•	Kii	ran's Property l	L.C.	•	
		Firm/Company			•
				•	•
	5239	S. Dale Mabry	Highway		
		Address	•	,	
	dermage - Mark	Tampa, FI 336	111	• •	
		City/State and Zip C			
,,,,	,	ngelok97@aol.	•	·	
	E-mail address: (to	be used for future an	nual report notification)		
For further informatio	n concerning this matter, please ca	ıll:	1 .		
	,,		-		•
Tha	ramatee Ramroop	at (· 813)	671 - 7		
- Nam	ne of Person	Area	Code & Daytime Teleph	one Number	
	AT CIL	The state of the s			
	or the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing I Certified Cop		\$60.00 Filing Fee Certificate of Sta Certified Copy	
		(additional co	py is eliciosed).	(additional copy	is enclosed)
		* *	* .	~.	٠
	ILING ADDRESS:	STI	REET/COURIER AD	DRESS:	
Reg	istration Section	Reg	istration Section		
	ision of Corporations . Box 6327		ision of Corporations Ion Building		
	ahassee, FL 32314	266	1 Executive Center Ci ahassee, FL 32301	rcle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	rans Property L.L.C.				
(Name of the Limited L	iability Company as it now appeal lorida Limited Liability Company)	rs on our records.)			
(Ar	torida Emitted Etability Company)	<i>t</i> "	밀		
The Articles of Organization for this Limited Liab	oility Company were filed on	09/24/2008	and assigned		
Florida document number L080000910	25		US RET		
This amendment is submitted to amend the follow	/ing:		FILED STATE CORPORATION		
A TO an additional to the state of the state			= RA		
A. If amending name, enter the new name of the	he limited liability company he	<u>re</u> :	SWITTENS		
The new name must be distinguishable and end with to "L.L.C."	the words "Limited Liability Compa	any," the designation "I	LC" or the abbreviation		
Enter new principal offices address, if applicab	ole:				
(Principal office address MUST BE A STREET					
[17 Methat office address West BE A STREET.	ADDRESSI	·			
	·	<u>, </u>			
•	•	•			
Enter new mailing address, if applicable:	· .	··········			
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>				
					
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter t</u>	he name of the nev		
Name of New Registered Agent:	Tharamatee Ramroop-				
New Registered Office Address:	5239 South Dale Mabry Hi	αhwav			
TION ROBINION OFFICE (MURES).	Enter Florida street address				
	Tampa	. Florida	33611		
*	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 Type of Action Title -Name MGR. David P. Ramroop ☐ Add 11515 Andy Drive Riverview, Florida 33569 ✓ Remove MGR" Tharamatee Ramroop 11515 Andy Drive ✓ Add Remove ☐ Add Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Tharamatee Ramroop

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00