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T. HAMPTON

OCT 24 2008

EXAMINER

Tallahassee, FL 32314

COVER LETTER

TO: Registration S Division of Co					
SUBJECT: RAMS	Hospitality, LLC		0		
		nited Liability Company)			
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Sanjay Patel				
		(Name of Person)			
	RAMS Hospitality, LLC				
		(Firm/Company)			
	6200 34th St N				
		(Address)			
	Pinellas Park, FL 33781				
		(City/State and Zip Code)			
For further information	concerning this matter, please c	all:			
Sanjay Patel		at (727) 204-9382			
(Name	of Person)	(Area Code & Daytime T	elephone Number)		
Enclosed is a check for t	the following amount:				
☑ \$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)		
Regist Divisi	ING ADDRESS: ration Section on of Corporations	STREET/COURIER Registration Section Division of Corporation Clifton Building	· · · · · · · · · · · · · · · · · · ·		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAMS Hospitality, LLC			<u></u>	
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on ited Liability Company)	n our records.)		
The Articles of Organization for this Limited Liability Con	and assigned			
Florida document number L08000093582				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company bere:			
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company,	" the designation	n "LLC" or the abbreviatio	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRES	<u></u>	SE	2003	
		<u> </u>	<u>a</u> <u>n</u>	
		TAR ASS	12	
Enter new mailing address, if applicable:		- E-X	ω	
(Mailing address MAY BE A POST OFFICE BOX)		- F.W	→	
		RA RA	= -	
		Dm A	9	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		records, ente	r the name of the nev	
Name of New Registered Agent:				
New Registered Office Address:				
	(Enter Florida 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)

MGR = Manager

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:

MGRM = Managing Member Title <u>Address</u> Type of Action <u>Name</u> MGR Şmruti Patel 6200 34th Street North ■7 Add Pinellas Park, FL 33781 Remove ☐ Add ☐ Remove ☐ Add Remove □ Add Remove My [1] Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated October 20. Signature of a member or authorized representative of a member Sanjay Patel

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00