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## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

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SUBJECT:

ROYAL GLOBAL EXPORTS 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:

MUNAWAR IQBAL

Name of Person

ROYAL GLOBAL EXPORTS LLC

Firm/Company

9900 W SAMPLE ROAD, SUITE 300,

Address

CORAL SPRINGS, FL 33065 City/State and Zip Code

rgellc@royalglobalexp.org E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MUNAWAR IQBAL

Name of Person

at (<u>954</u>) <u>825 0401</u> Area Code & Daytime Telephone Number

825 0401

Enclosed is a check for 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)

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

# **ROYAL GLOBAL EXPORTS LLC** (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on AUGUST 03, 2009 and assigned L09000074238 Florida document number \_\_\_\_\_

This amendment is submitted to amend the following:

#### A. If amending name, enter the new name of the limited liability company here:

N/A				
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation "LLC" or the ab	breviation		
Enter new principal offices address, if applicable:	N/A	<u></u>		
(Principal office address MUST BE A STREET ADDRESS)				
	(			
		ت ت ت ت ت		
Enter new mailing address, if applicable:	N/A	<u></u>		
(Mailing address MAY BE A POST OFFICE BOX)		🗶 सुध्राप		
		RA		
	C			
B. If amending the registered agent and/or registered of	fice address on our records, <u>enter the name of</u>	the new		

registered agent and/or the new registered office address here:

Name of New Registered Agent:	N/A	
New Registered Office Address:	Enter F	lorida 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

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

# MGR = Manager MGRM = Managing Member

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I.

Title	Name	Address	Type of Action			
MGRM	Shambhu Prasad Biyani	114 A. ARTHUR ROAD HEX 18-06 SINGAPORE 439826	_ ☑ Add _ □ Remove			
			Add Remove			
			_ Add _ Remove			
			Add Remove 			
			Add Remove 			
			Add Remove			
D. If amendin	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)				
 			SECRETARY JIVISION OF CU			
Dated	21 DEC , 200	19 Kan	STATE ORATIONS N:05			
Signature of a member or authorized representative of a member SHAMBHU PRASAD BIYANI						
Typed or printed name of signee Page 2 of 2						

Filing Fee: \$25.00

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