

LD9000119574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

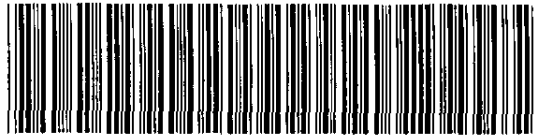
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. T. T. DEC 22 2009

COVER LETTER

TO Registration Section
Division of Corporations

SUBJECT Shanti Nine, 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:

David S. abrams, Esq.
Name of Person
Abrams & Abrams, P.A.
Firm/Company
9300 SW 87th Avenue, Suite 5
Address
Miami, Florida 33176
City/State and Zip Code
dabrams@abramslaw.cc
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Merle Sirju at (305) 598-1880
Name of Person Area Code & Daytime Telephone Number

Please send a check for the following amount:

- \$15.00 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 9227
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Tadlock, Brenda

From: Tadlock, Brenda
Sent: Thursday, December 17, 2009 4:45 PM
To: 'merle@abramslaw.cc'
Subject: FW: Shanti, LLC

Mr. Sirju,

You are correct. The name "SHANTI, LLC" was granted in error. I apologize for the oversight.

Please click on the following link to download the form and instructions to change the name on our records:

<http://form.sunbiz.org/pdf/cr2e049.pdf>

Because of our oversight, our office will gladly abate the \$25 filing and return a certified copy and certificate of status to you free of charge.

You may fax the completed form to my attention at 850-245-6030. Or, if you prefer, you may mail it to my attention at one of the following addresses:

Mailing Address: Brenda Tadlock, Registration Section
PERSONAL AND CONFIDENTIAL
PO Box 6327
Tallahassee, FL 32314

Courier Address: Brenda Tadlock, Registration Section
PERSONAL AND CONFIDENTIAL
2661 Executive Center Circle
Clifton Building
Tallahassee, FL 32301

Please do not hesitate to contact me if you have any questions concerning this matter. Again, I apologize for the oversight.

Best wishes,

Brenda L. Tadlock

Brenda L. Tadlock
Sr. Section Administrator
Registration Section
Division of Corporations
(850) 245-6911

From: Merle Sirju [mailto:merle@abramslaw.cc]
Sent: Thursday, December 17, 2009 4:02 PM
To: corphelp
Subject: Shanti, LLC

Re: Shanti, LLC - Document No. L09000119574

On December 16, 2009, we filed a LLC under the name "Shanti, LLC", which was approved and issued a document number L09000119574.

We filed three others on different names, on the same day, which were rejected due to existing LLCs with the same names. This prompted us to check on "Shanti, LLC" and there is another LLC with the same name active.

Is this an error or is it possible that a second LLC can use the same name?

Kindly advise.

Thank you for an early reply.

Merle Sirju
Abrams & Abrams, P.A.
9300 SW 87 Avenue, Suite 5
Miami, Florida 33176
Ph: 305-598-1880
Fx: 305-598-1881

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Shanti, 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 December 16, 2009 and assigned
File Number L09000119574.

This amendment is submitted to amend the following:

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

Shanti Nine, LLC

The name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or "L.L.C." or "LTD. LIABILITY CO." or "LIMITED LIABILITY COMPANY."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

D. _____

[Handwritten Signature]
Signature of a member or authorized representative of a member

[Handwritten Name]
Typed or printed name of signee