Ĵ, 9000119764 (Requestor's Name) (Address) 800180952348 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL 05/17/10 - 01040 - 013 **35.00 (Business Entity Name) (Document Number) Certified Copies Certificates of Status ____ 10 MAY 26 PM 1:5 11 Special Instructions to Filing Officer:

Office Use Only

UBRYAN MAY 27 2010 EXAMINER



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

May 19, 2010

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TARA CHAND PIRYANKA INVESTMENTS GROUP, LLC 5151 SW 159TH AVENUE MIRAMAR, FL 33027

SUBJECT: PIRYANKA INVESTMENTS GROUP, LLC Ref. Number: L09000119764

26 PH

We have received your document for PIRYANKA INVESTMENTS GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 810A00012649

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DO DOV 6207 Tallahaagaa Elamida 2021

COVER LETTER

TO: Registration Section Division of Corporations

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SUBJECT: Piryanka Investments Group, 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:

TAR	Name of Person
Piryanua	<u>Linvestments Group</u> , LLC Firm/Company
1881 Palm	Bay RE NE
Palm Bo	City/State and Zip Code
<u>a bimanik</u> E-mail address: ((to be used for future annual report notification)
For further information concerning this matter, please of	
TARA CHAND Name of Person	at (954) 235 2338
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\$30.00 Filing Fee \$ Certificate of Status	\$55.00 Filing Fee &\$60.00 Filing Fee,Certified CopyCertificate of Status &(additional copy is enclosed)Certified Copy(additional copy is enclosed)(additional copy is enclosed)

MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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ARTICLES OF T ARTICLES OF O	DRGANIZATION
O <u>Piryanka Investment</u> (<u>Name of the Limited Liability Compa</u> (A Florida Limited I	
The Articles of Organization for this Limited Liability Company Florida document number <u>LO900011976</u>	were filed on Dec 20/09 and assigned
This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limited liab</u>	<u>ility company here</u> :
The new name must be distinguishable and end with the words "Lim "L.L.C."	
Enter new principal offices address, if applicable: (<i>Principal office address MUST BE A STREET ADDRESS</i>)	5151 Sw 159 ^M Ave Miramar, FL 33027
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
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	, 1

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

<u>Title</u>	Name	Address	Type of Action
<u>MGR</u>	TAKA CHAND	5151 Sw 159th Ave Miramar, Fr. 33027	Add Remove
			Add Remove
			Add Remove
<u> </u>	<u> </u>		Add
			Add Remove
			Add Remove

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

Dated		FLLANASSEE, FLORIDA	10 MAY 26 PH 1: 51	FILED
	Signature of a member or authorized representative of a member TARA CIHAND Typed or printed name of signee			
	Page 2 of 2			

Filing Fee: \$25.00