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DIVISION OF CORPORATION

AUG 2 4 2012 T. HAMPTON

COVER LETTER

Division of Co	rporations			
SUBJECT:	RISHIKESH	INVESTMENT L'LC		
	Name of Limit	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
		Name of Person		
	5423			
		Address		
	VALRICO, FL 33594-8283			
	City/State and Zip Code joshi.kaushik@gmail.com			
	E-mail address: (t	to be used for future annual report notifica	ition)	
For further information of	concerning this matter, please c	all:		
	RAN NAYEE	at (813) 8 Area Code & Daytime 1	10-2666 Felephone 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: Registration Section

TO:

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

Karan S. Nayee, Esq.

Attorney at Law

503 E. Jackson Street, Suite 222 • Tampa, FL 33602 • (813) 810-2666 • Fax (813) 527-9990 • k.nayee@gmail.com

August 20, 2012

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

Re: Amendments for VIXXUM, LCC, RISHIKESH INVESTMENT, LCC and RADIANT EXPRESS, LLC

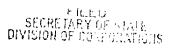
To whom it may concern:

Please find enclosed Articles of Amendment for VIXXUM, LLC, RISHIKESH INVESTMENT, LCC and RADIANT EXPRESS, LLC as authorized from LLCs' principal, Kaushik Joshi. Also find enclosed a check in the amount of \$75.00 for the above three (3) filings. Please do not hesitate to contact me at the above details should you require any additional information.

Yours sincerely,

Karan \$. Nayee, Esq.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



12 AUG 23 AM II: 30

RISHIKESH INV				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appea Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company Florida document numberL1.0000023778	were filed on	03/03/2010	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :		
The new name must be distinguishable and end with the words "Limi" L.L.C."	ited Liability Comp	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:	2928 E. FOV	VLER AVE.		
(Principal office address MUST BE A STREET ADDRESS)	TAMPA, FL	33612		
Enter new mailing address, if applicable:	2928 E. FOV	VLER AVE.		
(Mailing address MAY BE A POST OFFICE BOX)	TAMPA, FL 33612			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter t</u>	he name of the nev	
registered agent and/or the new registered office address her	<u>e</u> :			
Name of New Registered Agent:				
New Registered Office Address:	r	utan Elmida atuart		
	Enter Florida street address			
	City	, Florida	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 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>Address</u> Type of Action **Title Name** -Officer **ASHISH PATEL** ✓ Add 15417 LAKE BELLA VISTA DRIVE Mar TAMPA FL 33625 Remove ☐ Add Remove ☐ Add Remove Remove $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 19th AUGUST 2012 Signature of a member or authorized representative of a member KAUSHIK JOSHU Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00