

**L10000092293**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

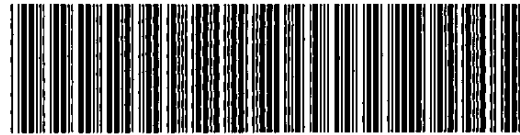
\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**700187213847**

11/01/10--01050--017 \*\*30.00

**FILED**  
**2010 NOV -1 AM 11:48**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**

**NOV 2 2010**

**EXAMINER**

## COVER LETTER

**TO: Registration Section\***  
**Division of Corporations**

**SUBJECT:** Kadaladi Veedu 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:

Shanthini Jayanthan

Name of Person

Kadaladi Veedu LLC

Firm/Company

35 Turnberry Road

Address

Wallingford, CT 06492

City/State and Zip Code

shanjayanthan@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shanthini Jayanthan

Name of Person

at ( 561 )

676-7035

Area Code & Daytime Telephone Number

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**

**FILED**

2010 NOV -1 AM 11:48

**Kadaladi Veedu LLC**

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 9/16/2010 and assigned  
Florida document number L10000097293.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

3570 S. Ocean Blvd.

Apt. # 810

Palm Beach, FL 33480

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

35 Turnberry Road

Wallingford, CT 06492

**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:

3570 S. Ocean Blvd., Apt. # 810

*Enter Florida street address*

Palm Beach

, Florida

06492

*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

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>
MGRM	Mallikha Samuel	7953 Kennedy Road Blacklick, OH 43004	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Sugu S. Suguness	4340 Manor Court East Dublin, OH 43017	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Ananthi Ranjan	112 Havendale Road Toronto, ONT M1S 1E5 Canada	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Nanthini Balakrishnan	2918 Mount Snow Court Ellicott City, MD 21042	<input checked="" 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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 NOV -1 AM 11:48

FILED

Dated October 27, 2010.

S. Jayanthan, Manager.  
Signature of a member or authorized representative of a member

Shanthini Jayanthan, MGMR  
Typed or printed name of signee