(Re	equestor's Name)			
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(Business Entity Name)				
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K. SALY EXAMINER APR 22 2011



April 8, 2011

DHABA LLC RUKAM JASSAL 4620 BAY BLVD. #1141 PORT RICHEY, FL 34668

SUBJECT: DHABA LLC Ref. Number: L11000019943

We have received your document for DHABA LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Enclosed is an amendment form for your convenience. Please send back the COMPLETE form.

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) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 611A00008594

# COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Dhaba LLC Name of Limited Liability Co	mpany				
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
RUKAM Jame of F	TI AL  erson				
DHA BALL Firm/Com	pany				
4620 Bay	B11/d. #1141				
Port Richer					
	Port @gmail.com				
For further information concerning this matter, please call:					
RUKAM TABIAL at 72  Name of Person	7) 466·7146  Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$30.00 Filing Fee \$ \$55.00 Fi Certificate of Status Certified (addition)					

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 11 APR 21 AM 10: 35

DHABA LL	C FALLAHASSEE, FLORIDA				
(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 216201 and assigned Florida document number L11000019943					
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 "Limite "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation				
Enter new principal offices address, if applicable:	RUKAM JASSAL				
(Principal office address MUST BE A STREET ADDRESS)	Daven port, Pc, 33897				
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	RUKAM TASIAL 4620 BAY RLVD. #1141 PORT RICHEY FL, 34668				
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: RUK	LAM TASIAL				
New Registered Office Address: 4620	Enter Florida street address				
New Registered Agent's Signature, if changing Registered Agent:	RICHEY, Florida 34668  Zip Code				
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple accept the abligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	ete performance of my duties, and I am familiar with and covided for in Chapter 608, F.S. Or, if this document is address, I hereby confirm that the limited liability				

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:

F" . . . .

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
16RM	RUKAM JAKGAL	9620 Bay BWJ. #1 Port Richey, PL, 346	Add Remove
	·		Add Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
D. If amend	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary	.) 
			<del></del>
_			
Dated	Signature of a member	or authorized representative of a member	
	RUI	KAM TYSI AZ or printed name of signee	. <u></u>

Page 2 of 2

Filing Fee: \$25.00