111000057441

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Special Instructions to Filing Officer:					
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AUG 21 2019 S. YOUNG



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

July 26, 2019

RAJ VANJANI RAJ HOLDINGS ORLANDO, LLC 4630 S KIRKMAN ROAD #207 ORLANDO, FL 32811

SUBJECT: RAJ HOLDINGS ORLANDO, LLC

Ref. Number: L11000057447

We have received your document for RAJ HOLDINGS ORLANDO, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

An individual must sign on behalf of the business entity you have designated as the registered agent.

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) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 719A00015305

COVER LETTER

TO:

Registration Section

Division of Corporations						
SUBJECT: Raj Holdings Orlando, L	LC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this n	natter to the following:					
Doi Vonioni						
Raj Vanjani Name of Person						
rame of retson						
Raj Holdings Orlando, LLC						
Firm/Company						
4630 S. Kirkman Road #207						
Address						
Orlando, FL 32811						
City/State and Zip Code						
raj.vanjani@gmail.com						
E-mail address: (to be used for future annual	report notification)					
For further information concerning this matter, ple	rase call:					
Raj Vanjani	at (516) 5263647					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					
INHS18 (2/14)						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FO LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compassibility the following statement in order to change its registered office or registered agent, or both, in the State Florida.

1.	Na	me of the limited liability company: Raj Holdi	ngs O	rlando	, LLC	
2. ('a)	6412 Queens Borough Avenue #307	(h	(b) 4630 S Kirkman Road #207		
'	(α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		/ 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Orlando, FL 32835		Orland	Orlando, FL 32811	
		05/16/2011		L1100	0057447	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	KRACHT LAW FIRM, PA				
	` /	Registered Agent and Registered Office shown on the records o	t the Florida	Dept. of Sta	te:	
		230 S. New York Avenue				
		Registered Office Address (MUST BE FLORIDA STREET	stered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		Suite # 101			FILED AUG 19 PN 4: 30 ALLANKSSEE FLORIDA	
		Winter Park, FL F	_L 32789	32789		
	(h)				- 30 ORIUJ	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office_ad	<u>dress</u> :	97 0	
		Registered Agents Inc.				
		NEW Registered Office Address:				
		7901 4th St N STE 300		 -	_	
		St. Petersburg,	լ_ <mark>3370</mark>	2	_	
the age was the	cha nt v s/wc arti	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited leare authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and as	of the regional find the limited limit	stered offic ompany, it nited liabili liability co Vanjani	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany. Printed or typed name of signee	
pro the to i not	visi obl nero ified	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, I d in writing of this change.	e perform led for in (I hereby c	ance of my Chapter 60 onfirm tha	duties, ånd I am familiar with and accepts, F.S. Or, if this document is being filed the limited liability company has been	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00

- Assistant Secretary

Signature of Registered Agent