

L120000042941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

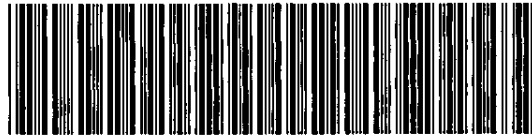
(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 28 2012
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04/13/12--01034--007 **60.00

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12 JUN 27 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sokhansanj-Rajan 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:

Rekha Rajan

Name of Person

Sokhansanj-Rajan LLC

Firm/Company

1120 E. Kennedy Blvd, Unit 1529

Address

Tampa, FL 33602

City/State and Zip Code

rr409@yahoo.com

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

For further information concerning this matter, please call:

Faramarz Sokhansanj

Name of Person

at (**214**)

682-7085

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2012

REKHA RAJAN
1120 E. KENNEDY BLVD., UNIT 1529
TAMPA, FL 33602

SUBJECT: SOKHANSANJ-RAJAN L.L.C
Ref. Number: L12000042941

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

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6051.

Leslie Sellers
Regulatory Specialist II

Letter Number: 612A00011928

Sokhansanj-Rajan LLC

Page 1 of 2

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	Faramarz Sokhansanj	333 NE 24th St. Unit 1207 Miami, FL 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Rekha Rajan	1120 E. Kennedy Blvd. Unit 1529 Tampa, FL 33602	<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
			<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.)

Filing LLC Articles and Bylaws (attached)

Dated April 11, 2012

Signature of a member or authorized representative of a member

Faramarz Sokhansanj

Typed or printed name of signee

SECRETARY OF STATE
FLORIDA

FILED