## L12000144578

(Requestor's Name)
(Address)
(Audiess)
(Address)
(2) (2) (3)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

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**2013 JUL -2 AM 8: 48** Secretary of State: Tall ahassef florida

N. Cuffigan JUL 2 - 20151

## **COVER LETTER**

TO: Registration Se Division of Cor		•		
SUBJECT: CENTURION TAX RESOLUTIONS LLC Name of Limited Liability Company				
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:		
	PRITHI	Name of Person		
		Firm/Company	<del></del>	
	-6735 CONIS	ROY RD SUITE 315		
	ORLAC	UDD FL 32835 City/State and Zip Code	·	
	PRITHIN E-mail address: (8	O C PA COM  be used for future annual report notification	<u>a)</u>	
For further information or	oncerning this matter, please ca	eil:		
PRITH! Name of	DA SWANI Person	at (561) 809-898 Area Code & Daytime Tele	ephone Number	
Enclosed is a check for th	e following amount:			
\$25.00 Filing Fee	Certificate of Status	Cl\$55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	Cl\$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



June 13, 2013

PRITHI DASWANI 6735 CONROY ROAD SUITE 315 ORLANDO, FL 32835

SUBJECT: CENTURION TAX SOLUTIONS LLC

Ref. Number: L12000144578

We have received your document for CENTURION TAX SOLUTIONS 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 913A00014936

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED: 2013 JUL -2 AN 8:48

SECRETARY OF STATE. TALLAHASSEE, FL'ORIDA

	TALLAHASSEE, FL'ORIDÀ
(FOUTURISO)	TAX SOLUTIONS LLC
(Name of the Limited Liability Comp	any as it now appears on our records.) Liability Company)
(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Compan	y were filed on 1115 2012 and assigned
Florida document number <u>L12000144578</u> .	
This amendment is submitted to amend the following:	
_	
A. If amending name, enter the new name of the limited lia	hility company here:
PRITHI DASWAN	U CPA PL
The new name must be distinguishable and end with the words "Lin "L.L.C."	nited Liability Company," the designation "LLC" or the abbreviation
	1-2-6
Enter new principal offices address, if applicable:	6735 CONROY RD SUITE 315
(Principal office address MUST BE A STREET ADDRESS)	
	ORLANDO FL 32835
Enter new mailing address, if applicable:	6735 CONROY RD SUITE 315
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 315
	ORLANDO FL 32835
	office address on any assembly output the name of the new
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address be	office address on our records, enter the name of the new
Name of New Registered Agent:	HI DASWANI
New Registered Office Address: 5 + 35	CONROY RA SUITE 315  Enter Florida street address
Dα	CLANDO Florida 32835
	City Zip Code
New Registered Agent's Signature, if changing Registered Agen	de:
	_
I hereby accept the appointment as registered agent and ag	gree to act in this capacity. I further agree to comply with
the provisions of all statutes relative to the proper and com accept the obligations of my position as registered agent as	uplete performance of my duties, and I am familiar with and s provided for in Chapter 608, F.S. Or, if this document is
being filed to merely reflect a change in the registered offic	
company has been notified in writing of this change	

Page 1 of 3

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 Type of Action Title **Address Name** MBR SEMIR R NAYAR 121 S Orange Ave ORLANDO FL 32801 Remove Remove

D. If	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	modify the address for morm to:
	. 6735 CONROY RD SUITE 315 DRIANNO FL 32835
	moduly the name of the LLC as stated on Pg,
	Remove the MBR, SEMIR R. NAYAR
Dated	TUNE 19, 2013.
	That
	Signature of a member or authorized representative of a member
	PRITHI DASWANI
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

FILED 2013 JUL -2 M 8: 48 SECRETARY OF STATES TALLAHASSEE, FLORIDA