

Division of Corporations

U3000027162
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DHRUV MANAGEMENT
Account Number : I20170000032
Phone : (813)951-0222
Fax Number : (727)499-2716

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Upatel@dhruvmanagement.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ROCKY POINT INVESTMENT 1 LLC

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2022 JUN 15 PM 3:40
FLORIDA
TALLAHASSEE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROCKY POINT INVESTMENT I 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:

Utkarsh Patel

Name of Person

Dhruv Management

Firm/Company

6903 Congress St

Address

New Port Richey, FL 34653

City/State and Zip Code

upatel@dhruvmanagement.com

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

For further information concerning this matter, please call:

Utkarsh Patel

813

951-0222

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
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☐ \$55.00 Filing Fee &
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(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ROCKY POINT INVESTMENT I LLC

(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 2/21/2013 and assigned Florida document number L13000027162.

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 contain 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) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

6903 Congress St

New Port Richey, FL 34653

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: _____

6903 Congress St

Enter Florida street address

New Port Richey

Florida 34653

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	PATEL, CHIRAG N	16235 IVY LAKE DR	<input type="checkbox"/> Add
		ODESSA, FL 33556	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PATEL, SUBHASH	55 LAKE LUCINDA DR.	<input type="checkbox"/> Add
		COVINGTON, GA 30016	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	NAVADIA, SANJAY	16235 IVY LAKE DR	<input type="checkbox"/> Add
		ODESSA, FL 33556	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Patel, Vijay	6903 Congress St	<input checked="" type="checkbox"/> Add
		New Port Richey, FL 34653	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

