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Division of Corporations

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L13000030551

Florida Department of State
Division of Corporations
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From:

Account Name : GULATI LAW
Account Number : I20130000014
Phone : (407) 900-5054
Fax Number : (407) 517-4931

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

Email Address: office@gulatiaw.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SHRI Bhole, LLC**

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TALLAHASSEE, FLORIDA

I. Burch, JAN 27 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHRI BHOLE, 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:

SARAH GULATI, Esq.

Name of Person

GULATI LAW, P.L.

Firm/Company

409 MONTGOMERY ROAD, UNIT 131

Address

ALTAMONTE SPRINGS, FL 32714

City/State and Zip Code

OFFICE@GULATILAW.COM

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

For further information concerning this matter, please call:

SARAH GULATI, Esq.

Name of Person

at 407 900- 5054

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 &
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(additional copy is enclosed)

☐ \$60.00 Filing Fee,
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(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

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

SHRI Bhole, 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 02/25/2013 and assigned
Florida document number L13000030551.

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 "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)

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TALLAHASSEE, FLORIDA

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:

Enter Florida street address

City

Florida

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
















































































































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TO: 4075174931

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02/01/14
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Date

1/24/14

D. B. Patel
Signature of a member or authorized representative of a member

D. B. Patel
Typed or printed name of signer

Page 2 of 3

Filing Fee: \$25.00

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