

L130000069507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

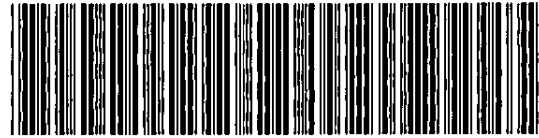
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1A

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MAY 29 2013

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FILED
13 MAY 28 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shayona Properties, 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:

Narsi Shingala

Name of Person

Shayona Properties, LLC

Firm/Company

28475 S. Dixie Hwy, Apt. 200

Address

Homestead, Florida 33033

City/State and Zip Code

nickshingala@yahoo.com

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

For further information concerning this matter, please call:

Narsi Shingala

Name of Person

at (305) 248-5622

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

FILED
13 MAY 28 PM 2:14
TALLAHASSEE, FLORIDA

FILED
13 MAY 28 PM 2:44
U.S. DEPARTMENT OF JUSTICE
TALLAHASSEE, FLORIDA
and assigned

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number **L13000069507**

Page 1 of 3

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	Narsi Shingala	28475 S. Dixie Highway	<input checked="" type="checkbox"/> Add
		Apt. 200	<input type="checkbox"/> Remove
		Homestead, FL 33033	
MGRM	Nikunj Shingala	28475 S. Dixie Highway	<input type="checkbox"/> Add
		Apt. 200	<input checked="" type="checkbox"/> Remove
		Homestead, FL 33033	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated May 20, 2013



Signature of a member or authorized representative of a member

Narsi Shingala

Typed or printed name of signee

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Filing Fee: \$25.00