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## **COVER LETTER**

TO:

Registration Section Division of Corporations

ECT. Apna Sapna Money Money

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:

**Umesh Patel** 

Name of Person

Apna Sapna Money Money

Firm/Company

109 Cedar Hammock Ln

Address

Panama City Beach, FL 32407

City/State and Zip Code

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

For further information concerning this matter, please call:

**Umesh Patel** 

404 512-1752

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

☐S55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐S60.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Apna Sapna Money Money				
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our la Limited Liability Company)	records.)		
The Articles of Organization for this Limited Liability	Company were filed on 08/16/20	and assigned		
Florida document number L13000116301	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liability company here:			
The new name must be distinguishable and end with the w"L.L.C."	vords "Limited Liability Company," the d	esignation "LLC" or the abbreviatio		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADI	DRESS)	: .		
		3		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		- Pres. 1		
B. If amending the registered agent and/or reg	istered office address on our reco	ds. enter the name of the new		
registered agent and/or the new registered office ad	ldress here:	<u> </u>		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florid	a street address		
		Enter Florida street address		
	,	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 608, 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 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>	Address	Type of Action
MGRM	Kunal Patel	3910 West Hwy 98	Add
		Panama City, FL 32401	Remove
			Add
			Remove
			Add
			Remove
			Add ?
			Add
			Remove
			Add
			Remove
			_

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	12/06/13
	morle
	Signature of a member or authorized representative of a member
	Umesh Patel
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00