

L17000119868

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** ELITE MANOR - KISSIMMEE LLC

**DOCUMENT NUMBER:** L13000119868

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ESTHER ARJOON

Name of Contact Person

ELITE MANOR - KISSIMMEE LLC

Firm/ Company

4034 SUNNY DAY WAY

Address

KISSIMMEE, FL 34744

City/ State and Zip Code

TRINIKOKO@HOTMAIL.COM

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

For further information concerning this matter, please call:

ESTHER ARJOON

Name of Contact Person

at ( 646 ) 369-7917

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT**  
to  
**ARTICLES OF ORGANIZATION**  
of  
**ELITE MANOR - KISSIMMEE LLC**  

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(A Florida Limited Liability Company)

The Articles of this Limited Liability Company were filed on **08/23/2013** and assigned Florida document number **L13000119868**.

This Amendment is submitted to amend the following:

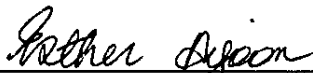
**A. ARTICLE III – Registered Agent, Registered Office, Registered Agent Signature:**

The name and the Florida street address of the registered agent are:

ESTHER ARJOON  
ELITE MANOR - KISSIMMEE LLC  
4034 SUNNY DAY WAY  
KISSIMMEE, FL 34744

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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*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.*



Registered Agent's Signature

**B. ARTICLE IV – Name and address of each person authorized to manage and control the LLC:**

<u>Type of Action</u>	<u>Title</u>	<u>Name</u>	<u>Address</u>
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Add	MGR	SHARDA SUKHU-GAFOOR	4034 SUNNY DAY WAY KISSIMMEE, FL 34744
<input type="checkbox"/> Change <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Add	MGR	ESTHER ARJOON	4034 SUNNY DAY WAY KISSIMMEE, FL 34744

The date of each amendment(s) adoption: February 18<sup>th</sup> 2016

EFFECTIVE DATE: APRIL 19, 2016

**Adoption of Amendment**

- ☒ The amendments were adopted by the members and the number of votes cast for the amendments were sufficient for approval.

Dated: February 18<sup>th</sup> 2016

Signature Sharda P Mafoor

Printed Name: SHARDA SUKHU-GAFOOR

Title: MGR

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