L13000 174341

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COVER LETTER

TO:	Registration Se Division of Cor		٧	
SUBJE	Rene	na, LLC		·
SUBJE	CI		ited Liability Company	· <u>·······</u>
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Geetha Kuc	hakulla	
			Name of Person	
		Renena, LL	<u>C</u>	
			Firm/Company	
		11265 Bridg	house Rd.	
			Address	
		Windermere	, FL 34786	
			City/State and Zip Code	
		dtottel@aol.com	to be used for future annual report not	ification)
For furt	her information c	oncerning this matter, please or	all:	
_	wn Totte	_	at (352) 732-9	1844
	Name o			ne Telephone Number
Enclose	d is a check for th	ne following amount:		
1 \$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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive Contact Tallahassee, FL 33	on Prations enter Circle

ARTICLES OF, AMENDMENT TO ARTICLES OF ORGANIZATION OF

Renena, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	•
The Articles of Organization for this Limited Liability (Florida document number L13000174341	Company were filed on 12/18/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and end with the words "L	imited 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 ADD	RESS)	
Enter new mailing address, if applicable:		SEGRETA IVISION OF
(Mailing address MAY BE A POST OFFICE BOX)		7 SKE
B. If amending the registered agent and/or registered agent and/or the new registered office ado	· ·	1 2 26
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action** Title Address **Name** 11265 Bridgehouse Rd MGR Renuka R. Kuchakulla Windermere, FL 34786 □ Remove □ Add ☐ Remove □ Add □ Remove ☐ Add ☐ Remove

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		<u></u>
		<u>-</u>
fective date must be specific, cannot be prior to date	of receipt or filed date and cannot be more than 90 days	
ffective date must be specific, cannot be prior to date late this document is filed by the Florida Department	of receipt or filed date and cannot be more than 90 days	
effective date must be specific, cannot be prior to date date this document is filed by the Florida Department and July 15. Cutto July 16.	of receipt or filed date and cannot be more than 90 days a of State) 2014 Challella	
date this document is filed by the Florida Department ed July 15, Guttra / Lu	of receipt or filed date and cannot be more than 90 days a of State)	

Page 3 of 3

Filing Fee: \$25.00