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MAR 23 2015

R. WHITE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHANKAR INVESTMENTS, 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:

JEFFREY C. HOSKINS

Name of Person

SHANKAR INVESTMENTS, LLC

Firm/Company

8901 NE 9TH COURT

Address

MIAMI, FLORIDA 33138

City/State and Zip Code

musicupload22@yahoo.com

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

For further information concerning this matter, please call:

JEFFREY C. HOSKINS

at 352 278-4531

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ ~~\$25.00~~ Filing Fee

35.00

☐ \$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

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SHANKAR INVESTMENTS, LLC

(on our records.)

Page 1 of 3

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

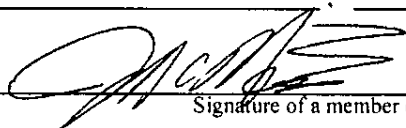
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	JEFFREY C. HOSKIN	8901 NE 9th Court, Miami, FL 33138	☐ Add
			☒ Remove
AMBR	JEFFREY C. HOSKINS	8901 NE 9th Court, Miami, FL 33138	☒ Add
			☐ Remove
			☐ Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated MARCH 2 2015



Signature of a member or authorized representative of a member

JEFFREY C. HOSKINS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00
\$85.00