L140000049775

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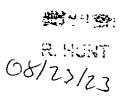
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ALLAHASSEE FLORI



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 08/23/2023	-		**WALK IN*	· *
ENTITY NAME SB Ho	spitality LLC			
DOCUMENT NUMBER				•
	PLEASE FILE THE ATTACH	ED AND RETURN		
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*	*PLEASE OBTAIN THE FOLLOWING I	FOR THE ABOVE ENTITY**	PM 12: 40	3801.7804
	Certified Copy of Arts & Amendment Certified Copy of Arts & Amendment Certificate of Status	s s Complete File (Inclading Annaal Reports	is)	
	Certificate of Status Reflecting:			
	APOSTILLE' / NOTARIAL	CERTIFICATION		
COUNTRY OF DESTINAT NUMBER OF CERTIFICA				
TOTAL OWED \$ 25	AC Ui Se he above number for any issues	CCOUNT # I20140000108 / Cuth	Hepparl	1
Please call Tina at ti	be above number for any issues	or concerns. Thank you so mu	ich!	

COVER LETTER

TO:	Registration Se Division of Cor			
CHDIE	SB Hospita	ality LLC		
SUBJE	CI:	Name of Lin	nited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Jaspreet S. Mayali		
			Name of Person	
Certilman Balin Adler & Hyman, LLP				
			Firm/Company	
		90 Merrick Avenue		
			Address	
		East Meadow, NY 11554		
			City/State and Zip Code	
		jmayall@certilmanbalin.co E-mail address: (m to be used for future annual report noti	fication)
For furth	ner information c	oncerning this matter, please c	·	
Jaspreet	S. Mayall		516 296-7061	
	Name o	f Person		e Telephone Number
Enclosed	f is a check for th	ne 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)
	Registr	ING ADDRESS: ation Section on of Corporations	STREET/COURI Registration Section Division of Corpor	n

P.O. Box 6327 Tallahassee, FL 32314 OLYSION OF CORPCRATION

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SB Hospitality LLC				
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited I Florida document number <u>L14000049775</u>	Liability Company	were filed on March	25, 2014	_ and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the design	ation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		c/o Certilman Balin	Adler & Hyman, LLP	
(Principal office address MUST BE A STRE		90 Merrick Avenue		
		East Meadow, NY 1	1554	
Enter new mailing address, if applicable:		c/o Certilman Balin .	Adler & Hyman, LLP	AUG 23
(Mailing address MAY BE A POST OFFICE BOX)		90 Merrick Avenue		
		East Meadow, NY 1	1554	73 08 109 73 4 109
B. If amending the registered agent and registered agent and/or the new registered of			records, enter the	~ ~
Name of New Registered Agent:	United Corpora	ate Services, Inc.		
New Registered Office Address:	3458 Lakeshor			
· ·		Enter Florida st	reet address	
	Tallahassee		Florida 32312	
		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.

Michael Barr

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mansuhbir Chouhan	555 Fifth Avenue, 11th Fl.	
		New York, NY 10017	■ Remove
			Change
AMBR	The White Dove Hotels Corp.	c/o Certilman Balin Adler & Hyman LLP	<u></u> ■ Add
		90 Merrick Avenue	Remove
		East Meadow, NY 11554	Change
Officers	Manoj Kumar Jain and Babita Jain	c/o Certilman Balin Adler & Hyman LLP	🗑 Add
		90 Merrick Avenue	Remove
		East Meadow, NY 11554	Change
Officer	Margaret Benua	c/o 1111-1119 Collins Avenue	≅ Add
		Miami Beach, FL 33139	☐ Remove
			Change
Officer	Rabinder Pal Singh	c/o 1111-1119 Collins Avenue	Add
		Miami Beach, FL 33139	☐ Remove
			Change
Officer	Mansukhbir Chohan	e/o 1111-1119 Collins Avenue	STORET DIVISION C 2023 AUG Ad Ad
		Miami Beach, FL 33139	UG 28 CREMENT
			Par Changes A

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	2023 AUG	DIVISION OF CORPORATIONS
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•	PM 12: 40	第2
•	0	UK.
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(If an ef <u>Note:</u>	tive date, if other than the date of filing: [Coptional] [Coptional]	07 (3)(is the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.	of:
Dated	August 22, 2023	
	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
	Manoj Kumar Jain	
	Typed or printed name of signee	

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Filing Fee: \$25.00