L14000071684

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COVER LETTER

Division of	Corporations		
SUBJECT: Suf	rya Capital Mana	agement LLC	
SUBJECT.		ited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub	mitted for filing.	
Please return all corr	respondence concerning this matter	to the following:	
	Sibyl Simon		
		Name of Person	
		Firm/Company	
	9600 W. Sa	mple Rd, Suite 5	506
	······································	Address	
	Coral Spring	gs, FL 33065	
		City/State and Zip Code	
	sibylks@gmail.co	OM to be used for future annual report noti	fication)
For further informat	ion concerning this matter, please c	•	Treation,
Sibyl Sim	ion	at (954) 263-3	073
	ime of Person	Area Code Daytim	e Telephone Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing Fe	ee ☐ \$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:

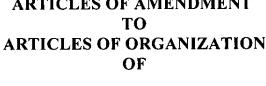
TO:

Registration Section

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



(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on May 1st, 2014 and assigned Florida document number L14000071684 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Surya Investment Group LLC The new name must be distinguishable and end with the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

Surya Capital Management LLC

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 = Ms $AMBR = Au$	anager athorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			Remove
			D Add
			Remove
			Add
,			Remove
			Add
			☐ Remove
			Nemove
			Add
			Remove

. If amending any other information, enter change(s) here: (Attach add	litional sheets, if necessary.)
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot the date this document is filed by the Florida Department of State)	(optional) not be more than 90 days after
Dated May 30th 2014	
Sil Simon	
Sibvi Simon	live of a member

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Filing Fee: \$25.00