# L1400011296F

(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Registration So Division of Cor			
SUBJECT:	BAYAN IN	VESTMENTS LL	.C
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	CAR	L S PITTER	
		Name of Person	
	AA ACCOUNT	ING TAX CONSUL	TING LLC
		Firm/Company	
	4313 NORT	H ROCK ISLANI	D ROAD
		Address	
	LAUDERHIL	L., FLORIDA 33	3319
	SRATAYES	City/State and Zip Code  @BELL SOUTH.NET	<del></del>
		to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
CARL S PI		<sub>at (</sub> 954 <sub>)</sub> 733-7	
Name c	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	ne following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	<ul> <li>\$55.00 Filing Fee &amp; Certified Copy (additional copy is enclosed)</li> </ul>	☐ \$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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	N INVESTMEN		
(Name of the Diff	(A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited leads of the Articles of Organization for the Limited leads of the Articles of Organization for the Limited leads of the Articles of Organization for the Limited leads of the Articles of Organization for the Limited leads of Organization for the Organization for the Limited leads of Organization for the Limited leads of Organization for the Orga	Liability Company	were filed on JUNE 27TH,2014	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
KAVA BAYAN, LLC			
The new name must be distinguishable and end with th	e words "Limited Liab	oility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		KAVA BAYAN, LLC	
(Principal office address MUST BE A STREET ADDRESS)		4313 NORTH ROCK ISLAND ROAD	
		LAUDERHILL, FLORIC	DA 33319
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		4313 NORTH ROCK ISLAND ROAD LAUDERHILL, FLORIDA 33319	
B. If amending the registered agent and registered agent and/or the new registered of		<u>e</u> :	r the name of the no
Name of New Registered Agent.		-	
New Registered Office Address: 4313 NORTH ROCK ISLAND ROAD  Enter Florida street address		<del></del>	
			לגו
	LAUDERHI	ILL, FLORIDA 33319 <sub>, Florida</sub> _	to a pro-
New Registered Agent's Signature, if changing	Registered Agent:	City	Zip Code T
I hereby accept the appointment as register provisions of all statutes relative to the pro			

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

**AMBR** = Authorized Member **Type of Action** Address <u>Title</u> Name 1 202 LAKEWOOD DRIVE UNIT 11A MGR KAVITA JAYAKUMAR-BECKER JUPITER, FLORIDA 33458 202 LAKEWOOD DRIVE UNIT 11A JUPITER, FLORIDA 33458 MGRM KAVITA JAYAKUMAR-BECKER \_□ Remove ☐ Remove ☐ Remove

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
	Effective date, if other than the date of filing:			
	Dated JULY 1ST, 2014			
	Signature of a member or authorized representative of a member			
	KAVITA JAYAKUMAR- BECKER			
	Typed or printed name of signee			

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Filing Fee: \$25.00