

L14000177623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2017 AUG 18 P 1:17
OFFICE OF STATE
TALLAHASSEE, FLORIDA

17 AUG 18 2017

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AUG 18 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MP 2014 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:

Peter Patel

Name of Person

Firm/Company

P.O. Box 128

Address

Gainesville, FL 32303

City/State and Zip Code

peterpatel909@gmail.com

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

SECRETARY OF STATE
TALLAHASSEE, FL 32304

2017 AUG 18 P 1:17

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For further information concerning this matter, please call:

Peter Patel

Name of Person

at

(830)

Area Code

322-3752

Daytime Telephone Number

Enclosed is a check for the 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)

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

MP 2-014 LLC

(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 11/17/2014 and assigned
Florida document number L14000177623

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 39 Jack M

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

P.O. Box 128
Quincy, FL 32352

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 128
Quincy, FL 32352

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:

PARESHBHAT (PETER) PATEL

New Registered Office Address:

39 Jack M. Quincy, FL 32352

Enter Florida street address

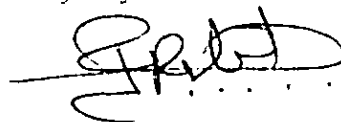
Quincy, Florida 32352

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	PARESHBHOTE	39 JACK DR GAINESVILLE, FL 32352	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Vikas Bhakta	4347 South St Marianna, FL 32408	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	MEHUL PATEL	2086 Hwy 71 S Marianna, FL 32408	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Swati, Gocool	2086 Hwy 71 S Marianna, FL 32408	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

President of MP2014 LLC Vikas Bhakta, (MGR)
are giving up share to Pareshbhai Patel.
Total share of 100%.

We need to remove 3 officers and add
Pareshbhai Patel as main officers to MP2014 LLC.

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2017 AUG 18 11 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 8/18/2017 (optional)

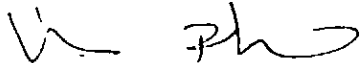
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 08/18/2017



Signature of a member or authorized representative of a member

Vikas Bhakta

Typed or printed name of signee