

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L1500087024

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : GULATI LAW
Account Number : I20130000014
Phone : (407)900-5054
Fax Number : (407)517-4931

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Office @ Gulati Law . com

2020 JUN 11 PM 3:25

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MANTY GROUP LLC

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O. SIMMONS

JUN 12 2020

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Corporate Filing Menu

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2020 JUN 11 PM 1:58

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MANTY GROUP 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:

SARAH GULATI

Name of Person

GULATI LAW, P.L.

Firm/Company

479 MONTGOMERY PLACE

Address

ALTAMONTE SPRINGS, FL 32714

City/State and Zip Code

OFFICE@GULATILAW.COM

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

For further information concerning this matter, please call:

SARAH GULATI

at 407 900-5054
()
Area Code Daytime Telephone Number

Name of Person

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

JUN 11 2020 PM 3:25

Montu Group 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 5/18/2015 and assigned Florida document number L15000087024

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 "L.L.C."

Enter new principal offices address, if applicable:

479 Montgomery Place

(Principal office address MUST BE A STREET ADDRESS)

Altamonte Springs, Florida 32714

Enter new mailing address, if applicable:

479 Montgomery Place,

(Mailing address MAY BE A POST OFFICE BOX)

Altamonte Springs, Florida 32714

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:

Gulati Law, P.L.

New Registered Office Address:

479 Montgomery Place

Enter Florida street address

Altamonte Springs

City

Florida 32714

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.

J. Gulati
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

2020 JUN 11 PM 3:25

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	TAHMINA HOSSAIN	479 Montgomery Place,	<input checked="" type="checkbox"/> Add
		Altamonte Springs, Florida 32714	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	FAHIMUL ISLAM	479 Montgomery Place,	<input checked="" type="checkbox"/> Add
		Altamonte Springs, Florida 32714	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NARGISH AKHTER	479 Montgomery Place,	<input checked="" type="checkbox"/> Add
		Altamonte Springs, Florida 32714	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RABBANI GHOLAM	479 Montgomery Place,	<input type="checkbox"/> Add
		Altamonte Springs, Florida 32714	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach ²⁰²⁰⁻⁰⁶⁻¹¹ additional sheets, if necessary.) 3:25

E. Effective date, if other than the date of filing: _____ (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 6-11-2020



Signature of a member or authorized representative of a member

Mahbubani Ghulam

Typed or printed name of signee