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SECRETARY OF STATE

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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	Same of Lim	NESTIMENT LI	<u>_</u>
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u>Hanne</u> <u>Busin</u>	Name of Person  LS CUNTOI  Firm Company	Service, Inc
	<u>3925</u> S	S. NOVA RO	bacl
	PCS @ bu E-mail address: (	City/State(and Zip Code SIVUSS CUNTY to be used for finare annual report noti	32127 Ulservice net
For further information e	oncerning this matter, please co		
Hannak	Poyd f Person	at (380) 700 Area Code Daytim	e Telephone Number
Enclosed is a check for the	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)
MAIL	INC ADDRESS.	ctbeet/caudi	ED ANINDECC.

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

Gannath Inve	estment LLC	
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L1500015879</u> 4		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited 1	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	iability Company." the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		DI VIS
(Principal office address MUST BE A STREET ADDRESS)	2	
		1 977 1 227
Enter new mailing address, if applicable:		COT SH
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address because of New Registered Agent:		the name of the new
New Registered Office Address:	Enter Florida street address	<u> 4,7555</u>
	Florida, Florida	- A.
	City	Zip Con O

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>	Address	Type of Action
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		Daytora Beach, FC 3211	Remove
MOR	Darshana Mandewal	1400 NAHantic A	v Cpt Add
	Mardewal	Daytona Brach, Fr	
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