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| (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| Sri Saranaı SUBJECT: | n, LLC | | | |
|---------------------------------|--|--|--|------------------|
| SUBJECT: | Name of Limited Lial | pility Company | | |
| The enclosed Articles of | Amendment and fee(s) are submitted | for filing. | | |
| Please return all correspondent | ondence concerning this matter to the f | ollowing: | ; | |
| | Shivon Patel, Esq. | | | |
| |) | Name of Person | · | |
| | The Principal Law Firm, P.L. | | | |
| | . | Firm/Company | | |
| | 4907 International Parkway, Suite | : 1061 | | |
| | | Address | | |
| | Lake Mary, FL 32746 | | TALL | 2016 |
| | City/ | State and Zip Code | A.C. | CO man |
| | shivon@principallaw.net | | <u> </u> | 5 |
| For further information of | E-mail address: (to be us concerning this matter, please call: | ed for future annual report notific | cation) | T C |
| Shivon Patel | | 407 322-3003 at () | Part Part Part Part Part Part Part Part | <u></u> |
| Name o | of Person | Area Code Daytime | Telephone Number | |
| Enclosed is a check for t | he following amount: | | | |
| \$25.00 Filing Fee | Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Sectificate of Certified Contact (additional copy) | f Status & py |

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

| Sri Saranam, LLC | |
|--|--|
| (<u>Name of the Limited Liability Compan</u> (A Florida Limited Li | y <u>as it now appears on our records.</u>) ability Company) |
| The Articles of Organization for this Limited Liability Company v Florida document number L15000196224 | vere filed on 11/19/2015 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liabil | ity company here: |
| The new name must be distinguishable and contain the words "Limited Liabilit | y 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 here: | |
| Name of New Registered Agent: | 2016 DAEC |
| New Registered Office Address: | |
| | Enter Florida street address |
| | City Tip Code |
| New Registered Agent's Signature, if changing Registered Agent: | 第一 |
| * T | |

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|------------------------|-------------------------|--|
| MGR | Nagabhushanam Gummalla | 1612 Normandy Way | |
| | | Leesburg, Florida 34748 | □ Remove |
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| ctive date, if other than the date of filing: | | | | (0.00 | ional) | |
| effective date is listed, the date must be specific and cannot be: If the date inserted in this block does not meet the ament's effective date on the Department of State's re- | applicable | date of filing o e statutory fi | r more inan 90 | oays and | r ming.) | Pursuant to 60 will not be lis |
| record specifies a delayed effective date, but ne 90th day after the record is filed. | out not a | n effective | e time, at | 12:01 | a.m. (| on the ear |
| February 2, 2016 | j | | | | | |
| | | | | | | |
| Signature of a member of | | | | | | |

Page 3 of 3

Filing Fee: \$25.00