

L15000207145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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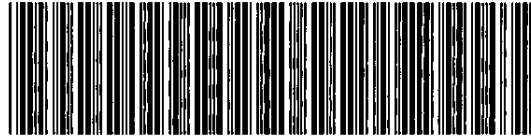
(Business Entity Name)

(Document Number)

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2015 DEC 30 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan DEC 31 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BHALLA KUMAR PROPERTIES 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:

ANKUR BHALLA
Name of Person
BHALLA KUMAR PROPERTIES LLC
Firm/Company
2901 N 50TH STREET, TAMPA
Address
TAMPA, FLORIDA 33619
City/State and Zip Code
BHALLAANKUR@YMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANKUR BHALLA at (513) 428-8148
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
2015 DEC 30 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BHALLA PROPERTIES 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 DEC 14, 2015 and assigned
Florida document number L15000207145.

This amendment is submitted to amend the following:

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

BHALLA KUMAR PROPERTIES LLC.

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:

(Principal office address **MUST BE A STREET ADDRESS**)

2901 W 50TH STREET
TAMPA, FLORIDA 33619

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

2901 N 50TH STREET
TAMPA, FLORIDA 33619

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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>
AMBR	HARRY KUMAR	2901 N 50TH STREET	<input checked="" type="checkbox"/> Add
		TAMPA, FLORIDA 33619	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ANKUR BHALLA	2901 N 50TH STREET	<input checked="" type="checkbox"/> Add
		TAMPA, FLORIDA 33619	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

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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 DECEMBER 27, 2015

Arber Bhalla

Signature of a member or authorized representative of a member

ANKUR BHALLA

Typed or printed name of signee