L16000073342

(Red	questor's Name)
(Add	dress)	
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(City	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Na	me)
(Doe	cument Number)
Certified Copies	Certificate	es of Status
Special Instructions to I	Filing Officer:	
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		9/27/21 TM

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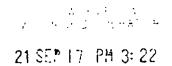
21 SET 17 PH 3: 22

COVER LETTER

TO: Registration Se Division of Cor			•
SUBJECT: Alyss	sa Investments, LLC		
		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Renjeev	J Kulangara	
		Name of Person	
		Firm/Company	
	14822 Swift	<u> </u>	
		Address	
	Tampa, FL 3	33625 City/State and Zip Code	
	Renje	eevk@gmail.com	
	E-mail address: (to be used for future annual report noti	fication)
For further information co	oncerning this matter, please c	ali:	
Renjeev J Kı		at (<u>813</u>) <u>546-458</u> Area Code Daytim	7
Name of	Person	Area Code Daytim	re Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	S30.00 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 S	ection	<u>Street Address:</u> Registration Se	
Division of Co P.O. Box 632		Division of Cor The Centre of T	
Tallahassee, F			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Alyssa Investments, LLC			
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appea oility Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L16000073342</u> .	ere filed on _	04/13/2016	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	v cempany h	ere:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the	designation "LLC" or the abbre	viation "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 ad agent and/or the new registered office address here:	dress on our	records, enter the name	of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Fi	lorida street address	
		, Florida	
	City		Zıp Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance (rovided for in	of my duties, and I am fa i Chapter 605, F.S. Or, ij	miliar with and Tthis document is

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 21 SEP 17 PH 3: 22

Title	<u>Name</u>	Address	Type of Action
AMBR	Renjeev and Tracy Kulangara Revocable Living Trust Dated December 14th, 2020	14822 Swiftwater Way, Tampa, Ft 33625	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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Defendi	we date if other than the date of filings
Note:	ve date, if other than the date of filing: (optional) etive 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tent's effective date on the Department of State's records.
ne record ord is file	I 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 ed.
Dated _	Septemer 14th 2021
	- Lake
	Signature of a member or authorized representative of a member
	Renjeev J Kulangara

Filing Fee: \$25.00