L16000024194

(Re	equestor's Name)	
(Ad	Idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu	usiness Entity Nar	me)
•	ocument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	-	
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Office Use Only



600285535136 L16-74194 Amend

05/09/16--01028--007 **30.00



MAY 11 2016 N. CAUSSEAUX

COVER LETTER

Division of Corp	OCATIONS
DAYTONA SUBJECT:	INVESTMENT GROUP II LLC
SUBSECT:	Name of Limited Liability Company
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.
Please return all correspon	ndence concerning this matter to the following:
	RANJIT KAUR .
	Name of Person
	DAYTONA INVESTMENT GROUP II LLC
	Firm/Company
	36 CARIBBEAN WAY
	Address
	PONCE INLET, FL 32127
	City/State and Zip Code
	nekpalsingh@yahoo.com
	E-mail address: (to be used for future annual report notification)
For further information co	oncerning this matter, please call:
RANJIT KAUR	480 239-7271
Name of	Person Area Code Daytime Telephone Number
Enclosed is a check for the	e following amount:
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

DAYTONA INVESTMENT GROUP II 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 Li Florida document number L16000074194	ability Company were fil	ed on	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability con	npany here:	
N/A			
The new name must be distinguishable and contain the w	ords "Limited Liability Comp	any," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able: N/A		
(Principal office address MUST BE A STREE			
Enter new mailing address, if applicable:	N/A		
(Mailing address MAY BE A POST OFFICE	<u></u>	<u></u>	
B. If amending the registered agent and/ registered agent and/or the new registered of		dress on our records,	enter the name of the nev
Name of New Registered Agent:	RANJIT KAUR		
New Registered Office Address:	36 CARIBBEAN WAY		
		Enter Florida street address	
	PONCE INLET	. Flo	rida <u>FL 32127</u>
	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>	Type of Action
MGRM	NEK-PAL SINGH	36 CARIBBEAN WAY	
		PONCE INLET, FL 32127	Remove
			Change
MGRM	DHAVAL G. PATEL	105 LOGENBERRY CT	□ Add
		DAYTONA BEACH, FL 32124	■ Remove
			Change
MGRM	NEHA D. PATEL	105 LOGENBERRY CT	
		DAYTONA BEACH, FL 32124	■ Remove
			Change
MGRM	MITUL PATEL	5220 BALDWIN ROAD, #20305	■ Add
		HOLLY, MI 48442	□ Remove
			Change Change Add -9 Remoye FLORIDA Add
			Add

N/A '		
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ective date, if other than the effective date is listed, the date in this.	ust be specific and cannot be prior to date of	(optional) filing or more than 90 days after filing.) Pursuant to 605.02 atory filing requirements, this date will not be listed
iment's effective date on the	Department of State's records.	nory ming requirements, this date will not be listed
ecord specifies a delayene 90th day after the re	ed effective date, but not an eff cord is filed.	ective time, at 12:01 a.m. on the earlier
d	2016	
Ro	nit Kaur	
100	1 -	
1	signature of a member or authorized repr	esentative of a member

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Filing Fee: \$25.00