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D. SCOTT JUN 5 2017

COVER LETTER

	egistration Sec ivision of Corp				
SUBJECT	. KARAVAT	TIL LLC			
SUMPER	•	Name of Lin	nited Liability Company		
The enclose	ed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please retur	rn all correspon	dence concerning this matter	to the following:		
		JOE KARAKUNNEL			
			Name of Person		
		<u> </u>	Firm/Company		
		713 SE 16TH ST #4			
			Address		
		FORT LAUDERDALE, F	L 33316		
		KARAVATTIL@AOL.CO			TSS T
		E-mail address: (to be used for future annual report notific	cation)	聖皇と
For further	information co	ncerning this matter, please ca	all:		2 5
JOE KARA	AKUNNEL		407 810-8596		FILED MOL
	Name of I	Person		Telephone Number	# # # # # # # # # # # # # # # # # # #
Enclosed is	a check for the	following amount:			
\$25,00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &

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

KARAVATTIL LLC		
(Name of the Lin	nited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
ne Articles of Organization for this Limited	Liability Company were filed on 6/8	/2016 and assigned
orida document number L16000110840	·	
is amendment is submitted to amend the fo	llowing:	
If amending name, enter the new name	of the limited liability company he	<u>re</u> :
new name must be distinguishable and contain the	words "Limited Liability Company," the de-	signation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if appli	icable:	
rincipal office address MUST BE A STRE	ET ADDRESS)	
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE		المسد.
mung man ess mai mg a rost or rec		200
If amending the registered agent and	Vor registered office address on	our records, enter the name of the
istered agent and/or the new registered of	office address here:	197
		E SI
Name of New Registered Agent:	JOE KARAKUNNEL	92. 1
New Registered Office Address:	713 SE 16TH ST #4	
	Enter Flori	da street address
	FORT LAUDERDALE	, Florida <u>33316</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

Page 1 of 3

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 = Ma AMBR = Au	mager thorized Member		
<u>Title</u>	Name	Address	Type of Action
			
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