

L16 000142956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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09/13/21--01022--022 ♦♦25.00

2021 SEP 13 AM 7:06

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SEP 24 2021

Registration Section
Division of Corporations

OBJECT: ANIVA COLLECTION AGENCY LLC
Name of Limited Liability Company

Enclosed Articles of Amendment and fee(s) are submitted for filing.

Return all correspondence concerning this matter to the following:

Raj Shah
Name of Person
ANIVA COLLECTION AGENCY LLC
Firm/Company
321 Northlake Blvd, Suite 215A
Address
North Palm Beach, FL 33408
City/State and Zip Code
rsshah412@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

by _____ at (561) _____ 315-5037
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$0.00 Filing Fee ☐ \$30.00 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO
ARTICLES OF ORGANIZATION
OF

ANIVA COLLECTION AGENCY LLC

2021 SEP 13 AM 7:06

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) -

Articles of Organization for this Limited Liability Company were filed on 07/29/2016 and assigned
a document number L16000142856.

A amendment is submitted to amend the following:

Amending name, enter the new name of the limited liability company here:

The name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

new principal offices address, if applicable:

321 Northlake Blvd, Suite 215A

Principal office address MUST BE A STREET ADDRESS

North Palm Beach FL 33408

new mailing address, if applicable:

321 Northlake Blvd, Suite 215A

Mailing address MAY BE A POST OFFICE BOX

North Palm Beach FL 33408

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:

Raj Shah

New Registered Office Address:

321 Northlake Blvd, Suite 215A

Enter Florida street address

North Palm Beach


City

Florida 33408

Zip Code

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 the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

oved from our records:

= Manager

R = Authorized Member

<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Shah, Kevin	8702 NATIVE DANCER ROAD NORTH	<input type="checkbox"/> Add
	PALM BEACH GARDENS, FL 33418	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change
SHAH, RAJ	321 Northlake Blvd. Suite 215A	<input checked="" type="checkbox"/> Add
	North Palm Beach FL 33408	<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
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		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

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

2021 SEP 13 AM 7:06

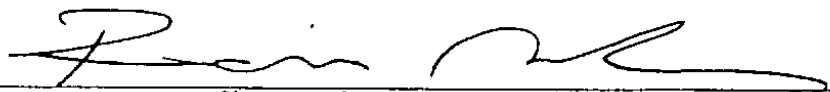
Effective date, if other than the date of filing: _____ (optional)

(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 document is filed.

Effective date: SEPTEMBER 7, 2021



Signature of a member or authorized representative of a member

RAJ SHAH

Typed or printed name of signee