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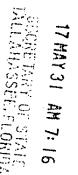
(Requ	iestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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COVER LETTER

TO: Registration and Division of C			
Shri Som	nath LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	
	Pinakin Patel		
		Name of Person	
	Shri Somnath LLC		
		Firm/Company	
	5607 Estero Blvd		
		Address	
	Fort Myers Beach, FL 3393	31	
	tp.tipmanagement@gmail.co	City/State and Zip Code	
	E-mail address: (t	to be used for future annual report noti	fication)
For further information	concerning this matter, please ca	all:	
Pinakin Patel		239 900-7598 at ()	
Name	of Person	Area Code Daytim	e 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)	□ \$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

Shri Somnath LLC		
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited I Florida document number	Liability Company were filed on	03/10/2017 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
<u>Principal office address MUST BE A STREI</u>	ET ADDRESS)	
		20
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	S = 1
		To the second
		on our records, enter the name of the ne
registered agent and/or the new registered o	ffice address here:	
Name of New Registered Agent:	Pinakin Patel	
New Registered Office Address:	5607 Estero Blvd	
regimered office / iddfess,	Enter F	lorida street address
	Fort Myers Beach	, Florida ³³⁹⁰⁷
	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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Pinakin Patel	5607 Estero Blvd	■ Add
		Fort Myers, FL 33931	5 10
			☐ Change
MGR	Tarun Patel	5607 Estero Blvd	
		Fort Myers Beach, FL 33931	■ Remove
			□ Change
			□ Add
			☐ Remove
		Change	
			□ Remove
			Change
		 	Add
			Remove
		Change	
			Remove
			☐ Change

			
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05 ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot	5/2017 (option	nal)	
lote: If the date inserted in this block does not meet t	e applicable statutory filing requirements, this of	ling.) Pursuant to 605. late will not be liste	.020. 2 d a
ocument's effective date on the Department of State's	records.		
e record specifies a delayed effective date,	but not an effective time, at 12:01 a	m on the earlie	ar i
The 90th day after the record is filed.	out not an enective time, at 12.01 a.	in. on the came	., ,
May, 15 20	7		
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Filing Fee: \$25.00