10004560

(Re	equestor's Name)	· · · · · · · · · · · · · · · · ·
(Ac	idress)	
(Ac	Idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bt	isiness Entity Nar	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	lv

.!,

.

.

•



07/27/17--01015--018 **25.00



• . •

T

S. WARREN AUG 0 1 2017

•	1		

COVER LETTER

TO: Registration Section Division of Corporations

BALAJI MANAGEMENTILLC

SUBJECT: ___

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

PRITI PATEL

Name of Person

BALAJI MANAGEMENT LLC

Firm/Company

13544 EARLY FORST CIR

Address

ORLANDO, FL 32828

City/State and Zip Code

RAJAT.VERMA@CPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAJAT VERMA

Name of Person

____561 ____8 __at (_____) ___ Area Code

8895325

Code Daytime Telephone Number

Enclosed is a check for the following amount:

🔲 - \$25.00 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 Tallabassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BALAJI MANAGEMENT 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 Liability Company were filed or	04/28/2017 and assigned
Florida document number 1.17000094560	-

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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

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)

PO BOX 212724

ROYAL PALM BEACH

FL 33421-2724

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zin 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 the proper and complete performance of my duties, and I amfamiliar 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. Thereby confirm that the limited mobility company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

5

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MANISH PATEL	13544 EARLY FROST CIR, ORL2	🖬 Add
			🗆 Remove
			Change
			O AJd
			Remove
			Change
·			🗆 Add
			Remove
			Change
			🖸 Add
			Remove
			Change
			🗆 Add
		- <u>-</u>	2000 200 2000 2
		<u> </u>	Change

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

	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
		·		
				_
<u> </u>			<u> </u>	
				<u> </u>
	<u>-</u>			
		<u>_</u>	· · · · · ·	
			<u> </u>	

E. Effective date, if other than the date of filing: _

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 record is filed.

107/24/2017	17.	
PuritiPatel	JUL 27	
Signature of a member or authorized representative of a member PRITEPATEL	PH 12:	те С
Typed or printed name of signee	- ^} -	_

Page 3 of 3

Filing Fee: \$25,00