L17000127522

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COVER LETTER

ro:	Registration Section
	Division of Corporations

NANDAAN PROPERTIES LLC

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:

HEMANTH KUMAR BANGALORE UMAPATHI

Name of Person

NANDAAN PROPERTIES LLC

.

Firm/Company

3314 HAWTHORNE AVE

Address

ROCKLEDGE, FLORIDA . 32955

City/State and Zip Code

HEMANTH.KUMARBU@GMAIL.COM

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

For further information concerning this matter, please call:

HEM	1ANTH KUMAR BA	NGALORE UMAPATHI	201 539 at ()) 5287	17 H
Name of Person Enclosed is a check for the following amount:		Area Code	Daytime Telephone Number	EILED	
₽ \$	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is encl)	losed) Certified	ing Fee.

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

NANDAAN PROPERTIES LLC		
(<u>Name of the Limited 1</u> (A]	iability Company as it now appears on our records.) forida Limited Liability Company)	<u> </u>
The Articles of Organization for this Limited Liabi Florida document number <u>L17000127522</u>		and assigned
This amendment is submitted to amend the following	uñ:	
A. If amending name, <u>enter the new name of the</u>	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BO</u>		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records. <u>e</u> address here:	nter the name of the i
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	5 5 5 5 5
	, Florid	a
-		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> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

. ,

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Nagamani Kurusanganapalli	3314 Hawthorne Ave	🖻 Add
		Rockledge FI 32955	
			Change
			Add
			Remove
			Change
			🗆 Add
			Remove
			Change
			🛛 Add
			🛛 Remove
		·	
			🗆 Add
		,,,,,,	C Remove
			Change

• • • •

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

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fective date, if other than the date of filing:	(Optional)
an encourse date is used, the date must be specific and cannot be prior to date of r star. If this date incortact in this black device not most the employed status	ting or more than 90 days after thing,) runstant to 005.02 tany filing requires south the data will not be bettered.
cument's effective date on the Department of State's records.	fory thing requirements, this date with hot be listed a
current seriective date on the Department of State's records,	
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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.

Dated		
A	8/2/	2017
Signature of a member or authorized representative of a member	1	

HEMANTH KUMAR BANGALORE UMAPATHI

Typed or printed name of signee

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Filing Fee: \$25.00