

L17000136925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

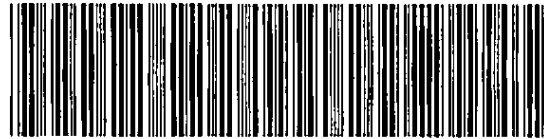
(Business Entity Name)

(Document Number)

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2017 SEP 18 PM 2:54  
CLERK OF DISTRICT COURT

K. SALY  
SEP 19 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** LAUDERHILL HOUSING SERIES II LLC

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:

DEEPAK KHOSA

Name of Person

LAUDERHILL HOUSING SERIES II LLC

Firm/Company

3930 CORAL RIDGE DR

Address

CORAL SPRINGS, FL 33065

City/State and Zip Code

DJBYCK@MSN.COM

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

For further information concerning this matter, please call:

DEEPAK KHOSA

561 350-9278

at (\_\_\_\_\_)

Name of Person

Area Code

Daytime 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**

LAUDERHILL HOUSING SERIES II LLC

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

FILED  
2017 SEP 18 PM 2:54  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 6/23/17 and assigned  
Florida document number L17000136925.

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 "L.L.C."

**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)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If 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:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JEEVAN TOPRANI	PO BOX 98	<input type="checkbox"/> Add
		RUWI 112 SULTANATE OF OM/	<input checked="" type="checkbox"/> Remove
		OMAN, OM	<input type="checkbox"/> Change
MGR	VINEET GUPTA	5222 ELMRIDGE DR	<input checked="" type="checkbox"/> Add
		MISSISSAUGA, CA L5M5A4	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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201 SEP 18 PM 2:54  
NOT A RECD  
CHANG  
ADD  
REMOVE

2017 SEP 18  
TALLAHASSEE, FL  
JULIA HARRIS

2017 SEP 18 PM 2:45  
FALLS CHURCH

**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.

Dated SEPTEMBER 14 2017

DEEPAK KHOSA

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**Filing Fee: \$25.00**