

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : GULATI LAW
Account Number : I20130000014
Phone : (407)900-5054
Fax Number : (407)517-4931

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Office@GulatiLaw.com

2019 DEC -9 P
SECRETARY OF
TALLAHASSEE
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SK SANFORD LLC

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Corporate Filing Menu

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2019 DEC -9 PM 3:28

TALLAHASSEE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SK SANFORD 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:

Sarah Gulati

Name of Person

Gulati Law, P.L.L.C.

Firm/Company

479 Montgomery Place

Address

Altamonte Springs, FL 32714

City/State and Zip Code

Office@gulatilaw.com

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

For further information concerning this matter, please call:

Sarah Gulati

407

900-5054

Name of Person

at ()

Area Code

Daytime Telephone Number

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2019 DEC -9 P 11:52

SK SANFORD LLC

(Name of the Limited Liability Company as it now appears on our records): SK SANFORD LLC
(A Florida Limited Liability Company) CLATASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/07/2017 and assigned
Florida document number 117900250419

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)

479 Montgomery Place,

Altamonte Springs, FL 32714

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:

Gulati Law, P.L.L.C.

New Registered Office Address:

479 Montgomery Place

Enter Florida street address

Altamonte Springs

Florida 32714

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	SIVA RAMA K KONDAPALLI	4864 RED BRICK RUN	☐ Add
		SANFORD, FL 32771	☒ Remove
			☐ Change
MGR	VUJAYA K INDHUPURI	479 MONTGOMERY PLACE	☒ Add
		ALTAMONTE SPRINGS, FL 32714	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

F. 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.

Dated 12/30/2019

Signature of a member or authorized representative of a member

koteswara rao dutikam

Typed or printed name of signer