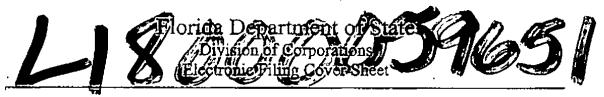
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2/27/2019

Division of Corporations



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Account Name

: GULATI LAW

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: (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. \*\*

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P.002/005

Registration Section

TO:

## **COVER LETTER**

, Div	ision of Co	rporations		
cilpicot.		M HOTELS, LLC		
SUBJECT:		Name of Lin	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Sarah Gulati, Esq.		
		<del></del>	Name of Person	<del></del>
		Gulati Law, P.L.		
			Firm/Company	
		479 Montgomery Place		
Address				
		Altamonte Springs, Florida	a 32714	
		office@gulatilaw.com	City/State and Zip Code	·
		E-mail address: (	to be used for future annual report notifi	cation)
For further in	iformation c	oncerning this matter, please of	att:	
Sarah Gulati	, Esq.		407 900-5054 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	ne following amount:		
<b>≘</b> \$25.00 F	iling 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)
	MAIL	NG ADDRESS:	STREET/COURIE	CR ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHUBHAM HOTELS, LLC	
(Name of the Limited Liability Com (A Florida Limited	ngny as it naw appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compar Florida document number L18000059651	ny were filed on 03/06/2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lis	ability company here:
The new name must be distinguishable and contain the words "Limited Lia	bility 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)	
	- 28 <u>E</u>
	三
Enter new malling address, if applicable:	- 9
(Malling address MAY BE A POST OFFICE BOX)	
registered agent and/or the new registered office address he  Name of New Registered Agent:	office address on our records, enter the name of the nevere:
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>.</u>
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	provided for in Chapter 605, F.S. Or, if this document is

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

Title AMBR	Name Tejash Patel	Address 11412 Dutch Iris Drive	Type of Action
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