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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

то:	Registration S Division of Co			
CLIDI		OF FLORIDA CITY, LLC		
SUBJ	ECI:	Name of Lir	nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		JIGAR JASANI		
			Name of Person	
		NAVKAR OF FLORIDA	CITY, LLC	
			Firm/Company	
		333 SE 1ST AVE		
			Address	
		FLORIDA CITY, FL 330	34	
			City/State and Zip Code	
		JMJASANI@GMAIL.COI		
		E-mail address: (to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please c	all:	
JIGAR	R JASANI		772 5280394	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
K9 \$25	5.00 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

NAVKAR OF FLORIDA CITY, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number £18000083232	were filed on 4/2/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	333 SE 1ST AVE	SEC ALLI
Principal office address MUST BE A STREET ADDRESS)	FLORIDA CITY, FL33034	APR
		T6
Enter new mailing address, if applicable:	333 SE 1ST AVE	of ST E.F.LO AM 7:
Mailing address MAY BE A POST OFFICE BOX)	FLORIDA CITY, FL33034	ATE RIDA 27
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her Name of New Registered Agent:		r the name of the ne
New Registered Office Address:	Enter Florida street 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>	Address	Type of Action
AMBR	PATEL, PREMSARAN	333 SE 1ST AVE	
		FLORIDA CITY, FL33034	■ Remove
			Change
AMBR	PATEL, BHARTI	333 SE 1ST AVE	
		FLORIDA CITY, FL33034	■ Remove
			Change
AMBR	SHAH, SHAMIR	333 SE 1ST AVE	
		FLORIDA CITY, FL 33034	■ Remove
			☐ Change
			☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Change

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>	Address	Type of Action
AMBR	PATEL, AMAR	333 SE 1ST AVE	
		FLORIDA CITY, FL33034	Remove
			Change
AMBR	PATEL, JAYESH	333 SE 1ST AVE	∃ Add
		FLORIDA CITY, FL33034	☐ Remove
			Change
AMBR	PATEL, NIMESH	333 SE 1ST AVE	= Add
		FLORIDA CITY, FL 33034	Remove
			Change
AMBR	PATEL, SHAMIR	333 SE 1ST AVE	= Add
		FLORIDA CITY, FL 33034	☐ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			□ Change

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Filing Fee: \$25.00