

h18000157304

(Requestor's Name)

(Address)

(Address)

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<sup>†</sup> admitted in Florida and New York

June 29, 2018

**Via Overnight Mail**

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

Re: **Articles of Amendment to Articles of Organization**

**Company: Westchase Journeys Holdings LLC**

**Document No: L 18000157304**

Dear Sir or Madam,

Please find enclosed Articles of Amendment to the Articles of Organization of Westchase Journeys Holdings LLC, a Florida limited liability company (the "Company").

These Articles of Amendment are intended to:

- 1) **REMOVE**: Sanjay M. Patel as Manager of the Company;
- 2) **REMOVE**: Ketan Patel as Manager of the Company; and
- 3) **ADD**: Nilam Patel as a Manager of the Company.

The Articles of Organization of the Company are **not** changed or modified in any other respect.

Enclosed is a check payable to the "Florida Department of State" for filing fees. Please feel free to call me at 407-801-3330 if you have any concerns or questions regarding this filing. We appreciate your assistance and prompt attention to this matter.

Very truly yours,

A handwritten signature in black ink, appearing to be 'Chirag', followed by a long horizontal flourish.

Chirag B. Kabrawala, Esq.

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** WESTCHASE JOURNEYS HOLDINGS 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:

NILAM PATEL

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

6908 SILVER SAGE CIRCLE

\_\_\_\_\_  
Address

TAMPA, FLORIDA 33634

\_\_\_\_\_  
City/State and Zip Code

KSPATEL1@GMAIL.COM

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

For further information concerning this matter, please call:

CHIRAG KABRAWALA ESQ.

407

801-3330

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

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

WESTCHASE JOURNEYS HOLDINGS LLC

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

The Articles of Organization for this Limited Liability Company were filed on 6-25-2018 and assigned  
Florida document number L18000157304.

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

FILED  
2018 JUN 25 AM 9:10  
TALLAHASSEE  
STATE OF FLORIDA



2018 JUL - 2 PM 2:15  
TALAHASSEE FL DRID

2010 JUL -2 PM 9:10  
TALLAHASSEE, FLORIDA

FILED

(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)

(b) The 90th day after the record is filed.

Dated June 29, 2018

Signature of a member or authorized representative of a member

CHIRAG B. KABRAWALA, ESQ., AUTHORIZED REPRESENTATIVE / AGENT

Typed or printed name of signee