## L18000198001

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VISION OF CORPORATION

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## **COVER LETTER**

TO:		tration Sect on of Corpo					
(11 173 <b>93</b> 2		isioners Ho	ospitality LLC				
SUBJEC	CI: _		Name of Lim	ited Liability Company			
The encl	losed A	articles of A	mendment and fee(s) are sub	mitted for filing.			
Please re	eturn a	Il correspond	dence concerning this matter	to the following:			
			Kalpesh Patel				
			Visioners Hospitality LLC	Name of Person			
			2709 Longleaf Rd	Firm/Company			
			Panama City FL 32405	Address			
			kal_pat@yahoo.com	City/State and Zip Code			
			E-mail address: (	to be used for future annual report notificat	ion)	Ö	755
For furth	ner info	ormation cor	neerning this matter, please ca	all:		Jijk.	注辞 会長。
Kalpesh	h Pate	I		850 303-1183		10	KRY C
		Name of I	Person	Area Code Daytime Te	lephone Number	PM12: 32	F STATE PORATION
Enclosed	d is a c	heck for the	following amount:			19	SHO
□ \$25.	.00 Fili	ng Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Stat Certified Copy (additional copy is en	tus &	

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

Visioners Hospitality LLC		
( <u>Name of the Limited Liah</u> (A Flor	oility Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L18000198001	Company were filed on 08-17-2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
		<b>19</b> 15 16 1
		芸芸
Enter new mailing address, if applicable:		10 TREE
(Mailing address MAY BE A POST OFFICE BOX)		P
maning united man beautiful to the second		OF STA
		: 32
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac	gistered office address on our records, <u>enter</u> <u>ldress here</u> :	the name of the ne
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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	Kalpana Patel	22319 Rolling hill lane	
MBR			□ Add
	<del></del>	Laytonsville MD 20882	
		•	<b>-</b> n
			Remove
		<del></del>	Change
AMBR	Ramesh Patel	22319 Rolling hill Lane	
AWDIX			<b> \barack</b> Add
		LAytonsville MD 20882	
			Remove
			B Kelliote
		<del></del>	Change
MBR	Sophia Patel Management LLC	2 Edgemere Drive	
			🖶 Add
		Albertson NY 11507	
			Remove
			Characa
	Constitues a Tantahada	5000 Hwy 6, PO Box 1896	☐ Change
MBR	Sanatkumar Tankalwala	3000 Hwy 6, FO Box 1896	
			B Add
		North Estham MA 02651	
			□ Remove
			Change
			Add
			Remove
			Change
			□ Add
			□ n
			Remove
			Change

- •	tion, enter change(s) here: (Attach additional sheets, if necessary.)
	<del></del>
	<del></del>
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	<del>-</del>
	01-01-2019
Effective date, if other than the of (If an effective date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Department.	date of filing: (optional)  be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3 bock does not meet the applicable statutory filing requirements, this date will not be listed as the
the record specifies a delayed ) The 90th day after the reco	effective date, but not an effective time, at 12:01 a.m. on the earlier of: ord is filed.
Dated	2019
Daied	2009
<del></del>	Marin-
S	Signature of amember or authorized representative of a member
Kalpesh Patel	
	Typed or printed name of signec

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Filing Fee: \$25.00