18000210852

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COVER LETTER

TO: Registration Se Division of Cor			•
ANJEE MA	ARINA LLC		
SOUTECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ANJALI KASTURIA		
		Name of Person	
	ANJEE MARINA LLC		
		Firm/Company	
	7021 GRAND NATIONA	L DR STE 106	
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
	E-mail address; (to be used for future annual report notifi	ication)
For further information c	oncerning this matter, please co	alt:	
Name of Person		at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25,00 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



ANJEE MARINA 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 v	vere filed on	SEPTEMBER 4, 2	2018 and assigned
Florida document number L18000210852			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company	here:	
The new name must be distinguishable and contain the words "Limited Liability	y Company," t	ne designation "LLC" o	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)			<u></u>
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		on our records.	enter the name of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter	Florida street address	
	Florida Zip Cod		ida
	Сііу		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pa being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance rovided for i	of my duties, and n Chapter 605, F	I am familiar with and
1f Chan	- rina Registeres	LAgent 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	<u>Name</u>	Address	Type of Action
MGR	SEHGAL, SANJAY	7021 GRAND NATIONAL DR STE 106, ORLANDO, FL 32819	■ Add
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Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the D	ock does not meet the applicab	date of filing or more than 9 de statutory filing require	(optional) 0 days after filing.) Pursuant to 605.0 ments, this date will not be listed)207 (3)(I as the
the record specifies a delayed) The 90th day after the rec		an effective time, al	: 12:01 a.m. on the earlier	of:
Dated SEPTEMBER 7	. 2018	. ·		
	· Kashuz Signature of a member or authori			

Page 3 of 3

Filing Fee: \$25.00