L19000146120

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
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| |

Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | ar · |
|--|---|
| SUBJECT: AMOYHA L. Name of Limite | d Liability Company |
| | , |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Change | and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to | the following: |
| RAMYA ARERATAHA | |
| AMORHA L.L.C. | |
| AMUCHA L.L.C. Firm/Company | |
| 30152 southyshound Court Address | |
| City/State and Zip Code | |
| E-mail address: (to be dised for future annual report | notification) |
| For further information concerning this matter, please call | : |
| RAMYA ARERANGHIAM at (8) Name of Person | Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |
| Enclosed is a check for the following amount: | |
| , ☐ \$25 Filing Fee | \$55 Filing Fee & Certified Copy |

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| 1. | Na | ime of the limited liability company: AWOGHA L. L. C |
|------------------|------------------------|--|
| 2. | (a) | (b) |
| | | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | | 30152 southernwood court 30152 southern wood cout |
| | | wistry chapel 72 33543 western chapel FL 2354 |
| 3. | | Date of filing/registration in Florida 4. Document number |
| 5. 6 | (a) | PILLAPOPA, JAIKAN |
| (=) | | Registered Agent and Registered Office shown on the records of the Florida Dept. of State: |
| | | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) |
| | | 30152 southesperoud court |
| | | WESLEY CHASEL ,FL 33543 |
| (1 | (b) | RAMYA ARERANG AIAH JAKAM PILLAPPOA Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| | | Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| | | |
| | | NEW Registered Office Address: |
| | | 20152 southernwood covet |
| | | Lessley chapel , FL 33543 |
| If 1 | the 1 | imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after |
| ag wa | ent v is/w | inge or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company. |
| | | TIALRAM KULLARDA |
| _; | Signa | ture of a member or authorized representative of a member Printed or typed name of signee |
| pre the to | ovisi 2 obl merc | by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address. I hereby confirm that the limited liability company has been I in writing of this change. |
| Si | ortatu | re of Registered Aught |