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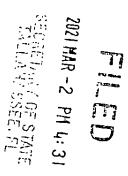
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JANDI



February 16, 2021

Margaret Freeman, Division of Corporation 2661 Executive Center Circle West Tallahassee, FL 32301

Subject: Request for Amendment

Margaret:

Please find enclosed checks in the amount \$ 25.00 each along with the form for the certificate of Amendment for the below entities

Atithi Resorts LLC – (Current Name AMRIT RESIDENCES I, LLC)

Personalized Wellness Memberships LLC (Current Name: Amrit Lifestyle Memberships LLC

I would like to request your help and assistance in getting this amended.

Should you have any questions please do not hesitate to call me.

Sincerely,

Anju Kumar 561-222-9458 anju@creativechoice.net

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Amrit Lifestyle Memberships LLC			
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records la Limited Liability Company)	5,)	
The Articles of Organization for this Limited Liability	Company were filed on 04/03/2020	and assigned	
Florida document number L20000096196	 '		
This amendment is submitted to amend the following:			
a. If amending name, enter the new name of the lin	nited liability company here:		
Personalized Wellness Memberships LLC			
he new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC		
Enter new principal offices address, if applicable:		2021 HJ	
Principal office address MUST BE A STREET ADD	RESS)		
			
		SSE PR	
Enter new mailing address, if applicable:	·	Ems = O	
Mailing address MAY BE A POST OFFICE BOX)		FA 3	
		· · · · · · · · · · · · · · · · · · ·	
 If amending the registered agent and/or registere gent and/or the new registered office address here: 		the name of the new regist	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		orida	
	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	
AMRR =	Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
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ffective date, if other than the date of filing:	(optional)	
an effective date is listed, the date must be specific and cannot be prior to date of fi lote: If the date inserted in this block does not meet the applicable statute ocument's effective date on the Department of State's records.	lling or more than 90 days after filing.) ory filing requirements, this date w	Pursuant to 605.020 vill not be listed a
record specifies a delayed effective date, but not an effective time, at 12:0 is filed.	01 a.m. on the earlier of: (b) The	90th day after th
February 15 2021		
134		
Signature of a member or authorized repre		

Filing Fee: \$25.00