## LZ1000020375

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

TO:

Registration Section Division of Corporations

	LOBAL REAL ESTATE HOL	DINGS LLC , .	
SUBJECT:	Name of Lim	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JYOTI MOHANTY		
		Name of Person	
	MOKU GLOBAL REAL	ESTATE HOLDINGS LLC	
		Firm/Company	<del></del>
	15140 PALMWOOD RO	AD	
		Address	<u></u>
	PALM BEACH GARDEN	IS FL 33410	
		City/State and Zip Code	
	JMNTY@YAHOO.COM		
	E-mail address: (	to be used for future annual report not	ification)
For further information c	concerning this matter, please co	all:	
JYOTI MOHANTY		561 313-7743 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, Fl	rporations Tallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOKU GLOBAL REAL ESTATE HOLDINGS LI		
( <u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial	bility 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 agent and/or the new registered office address here:	e address on our records, <u>enter the na</u>	2021 5
Name of New Registered Agent:		. [] 
New Registered Office Address:	Enter Florida street address	<del></del>
	Enter Piorida street address	

## 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.

City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SUNEET KUKREJA	18604 SE RANCH LANE	■Add
		JUPITER FL 33478	□Remove
			□Change
<del></del>			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			Remove
			Change
			, □Add
			□Remove
			☐ Change
	<del></del>	<del></del>	
		<del></del>	Remove
			□Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: 1 locume	ve date, if other than the date of filing:
record d is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after ed.
ated_	1 27 21.  Signature of a member of a membe
	Signature of a member or pathorized representative of a member
	<u> </u>

Filing Fee: \$25.00