

L21 000155182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

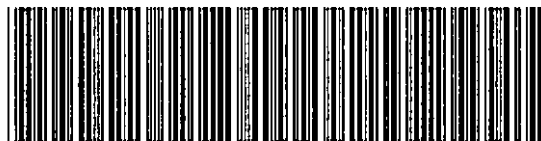
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SEC  
TALLMADGE, MI  
2021

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REC-27

BRUCE  
DEC 15 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PATEL MANOR LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NIRAV PATEL

Name of Person

PATEL MANOR LLC

Firm/Company

16366 HYDE MANOR DR

Address

TAMPA, FL 33647

City/State and Zip Code

kalel.nirav@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nirav Patel

813

997-0605

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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2021 DEC -3 PM 5:40  
TALLAHASSEE, FL

**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

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Patel, Delaura	16366 HYDE MANOR DR	<input type="checkbox"/> Add
		TAMPA, FL 33647	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Patel, Nirav	16366 HYDE MANOR DR	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33647	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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2021 DEC - 15 PM 3:40  
TALLAHASSEE, FL

2021 DEC -3 PM 6:40  
ALLIANCE

2021 DEC -3 PM 6:40  
ALLAN

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 29<sup>th</sup> November : 2021

NIRAV PATEL

Typed or printed name of signee