L21000248677

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
	J. HORNE NOV 24 2021
,	10/18

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FILED
2021 OCT 18 AM 3: 37
SECRETARY OF STAIL



2021 CCT 18 NM 11: 32

FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 4, 2021

SURABHI SINGH 1540 CITRUS MEDICAL COURT OCOEE, FL 34761 US

SUBJECT: SIRI REAL ESTATE HOLDINGS LLC

Ref. Number: L21000248677

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne Regulatory Specialist II

Letter Number: 021A00024032

COVER LETTER

TO: Registration Sec Division of Corp			,
	ESTATE HOLDINGS LLC		•
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	ndence concerning this matter to	o the following:	
	SURABHI SINGH		
		Name of Person	
	SIRI REAL ESTATE HOLI	DINGS LLC	
		Firm/Company	
	1540 CITRUS MEDICAL O	COURT	
		Address	
	OCOEE FL 34761		
		City/State and Zip Code	
	SURABSINGH@GMAIL.C	OM o be used for future annual report notifi	ication)
For further information co	oncerning this matter, please cal	•	cuton,
SURABHI SINGH		407 383-1953 at ()	
Name of	F Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

SIRI REAL ESTATE HOLDINGS LLC

2021 OCT 18 AM 3:37

SECRETARY OF STATE

TALLAHASSEE, FLORE A The Articles of Organization for this Limited Liability Company were filed on 05/27/2021 and assigned Florida document number L21000248677 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida _ City 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member	

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	RYAN DEEN	1540 CITRUS MEDICAL COURT	□ Add
		OCOEE FL 34761	= Remove
			□Change
MGR	SRINIVAS SEELA	100 N DEAN ROAD SUITE 101	
		ORLANDO FL 32825	□Remove
			□Change
MGR	HARINATH SHEELA	100 N DEAN ROAD SUITE 101	= Add
		ORLANDO FL 32825	□Remove
			☐ Change
MGR	SHASHANK THUMURU	1540 CITRUS MEDICAL COURT	= Add
		OCOEE FL 34761	□Remove
			□Change
MGR	VINEEL SOMPALLI	1540 CITRUS MEDICAL COURT	≣ Add
		OCOEE FL 34761	□Remove
MGR	MANVIR S DHILLON	1540 CITRUS MEDICAL COURT	= Add
		OCOEE FL 34761	□Remove
			□Change

				
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tive date, if other than the date	SEPTEM	BER 27, 2021	(option	a])
ffective date is listed, the date must be s If the date inserted in this block of	pecific and cannot be price	or to date of filing or mo	re than 90 days after fil	ing.) Pursuant to 605.
ment's effective date on the Depart			requirements, this d	ate will not be liste
rd specifies a delayed effective dat īled.	e, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after
SEPTEMBER 23	2021	·	_ /	
Add and	_		\angle	
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0ct [5,202]	ature of a member of aut	horized representative of	of a member	

Filing Fee: \$25.00