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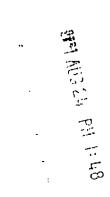


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COVER LETTER

TO:		istration Sec sion of Corp				
		HIMANSHU	J SHARMA LLC			
SUBJEC	CI:		Name of Limi	ted Liability Company		
The encl	losed	Articles of A	mendment and fee(s) are subt	nitted for filing.		
Please re	cturn	all correspon	dence concerning this matter t	to the following:		
			HIMANSHU SHARMA			
				Name of Person		
			HIMANSHU SHARMA LI	LC		
			·	Firm/Company	· · · · · ·	
			6708 SPRING MOSS PLA	СЕ		
				Address		
			LAKEWOOD RANCH, FI	. 34202		
				City/State and Zip Code		<u>.</u>
			haimsharma@gmail.com			
			E-mail address: (t	o be used for future annual repor	rt notification)	
For furth	her in	formation co	ncerning this matter, please ca	ill:		
HIMAN	ISHU	SHARMA		248 894-05 at ()		
	•	Name of	Person	Area Code D	aytime Telephor	ne Number
Enclosed	d is a	check for the	e following amount:			
■ \$25	,00 F	iling 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIMANSHU SHARMA LLC	
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan	<u>oears on our records.)</u> ly)
The Articles of Organization for this Limited Liability Company were filed on Florida document number L21000269965	06/10/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>/ here</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," to	he designation "L.L.C." 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:	- P
(Mailing address MAY BE A POST OFFICE BOX)	=
	5
	P
B. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here:	r records, enter the name of the new regis
	, •
Name of New Registered Agent:	
New Registered Office Address:	Floridu street address
7,240	
City	, Florida Zin 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 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	HIMANSHU SHARMA	6708 SPRING MOSS PLACELAKEWOOD RANCH	i. _ ≣∧dd
			_ □Remove
			_ Change
AR	ANGELICA ROSSI	6708 SPRING MOSS PLACELAKEWOOD RANCH	I. □Add
			_ = Remove
			_ □Change
			_ 🗆 Add
			□Remove
			☐Change
			_ ⊡Add
			_ □Remove
		·	- _ □Change
			_ 🗆 Add
			_ 🗆 Remove
			_ Change
			_ □Add
			_ □Remove

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	6+1:
	9
ive date, if other than the date of filing:	(optional)
ective date is listed, the date must be specific and cannot be prior to date of the late inserted in this block does not meet the applicable statu	filing or more than 90 days after filing.) Pursuant to 605 tory filing requirements, this date will not be liste
ent's effective date on the Department of State's records.	inory runing requirements, this date with not be fish
d 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.	
08/19/2021	
· · · · · · · · · · · · · · · · · · ·	
Signature of a member or authorized repre	esentative of a member