## トなし いしし うちろ 000

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

Office Use Only



200372476142

08/30/21--01010--003 \*\*25.00

2021 AUG 30 PH 2:

Ally 13031

## **COVER LETTER**

Fee, f Status & by (is enclosed)

Tallahassee, FL 32303

FILED

## TO

2021 AUG 30 PM 2: 11 SECRETARY OF STATE TALLAHASSEE, FLEE

ARTICLES OF ORGANIZATION OF

ARYAJIYA LLC				
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited I Florida document number	Liability Company were filed on $\frac{8}{2}$	25/21 and assigned		
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability company h	ere:		
The new name must be distinguishable and contain the	words "Limited Liability Company," the c	esignation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	··		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u> .			
B. If amending the registered agent and/or agent and/or the new registered office address.		ecords, enter the name of the new register		
Name of New Registered Agent:	ALPESHKUMAR D PATEL			
New Registered Office Address:	1315 S JEFFERSON ST			
	Enter Florida street address			
	MONTICELLO	, Florida 32344		
	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 at or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u> MGR	Name .	Address	Type of Action
MGR	ALPESHKUMAR D PATEL	1315 S JEFFERSON ST	
		MONTICELLO, FL 32344	
			<b>≘</b> Change
			Remove
			Change
			□Add
			Remove
			Change
			□Add
			□Remove
			☐ Change
		<del></del>	□ Add
			□Remove
			□Change
			□Add
			□Remove

_ <del>_</del>		<del>_</del> _	<u></u>	
	· ·			
	. , -		<u> </u>	
	<del>.</del>			
<del></del>				
<del></del>				
			· · · · · · · · · · · · · · · · · · ·	
Effective date, if other than the offerive date is listed, the date must <u>Note:</u> If the date inserted in this blo document's effective date on the De	ck does not meet the a	applicable statutory t	(opt or more than 90 days afte iling requirements, th	ional) r tiling.) Pursuant to 605,020 is date will not be listed a:
ne record specifies a delayed effective ord is filed.	date, but not an effec	tive time, at 12:01 a.	m. on the earlier of: (	b) The 90th day after the
Dated	. 2021	·		
		. )		
	And	200		
· · · · · · · · · · · · · · · · · · ·	Signature of a member o	Tauthorized representa	tive of a member	