

L21000424850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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10/16/23--01026--004 **25.00

2023 OCT 16 PM 1:24

A. PARISHANI

OCT 22 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Natayan LLC

Name of Limited Liability Company

2023 OCT 16 PM 1:24

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

Please return all correspondence concerning this matter to the following:

Brenique Bannister

Name of Person

Natayan LLC

Firm/Company

663 Thomas Jefferson Way

Address

Orlando, FL 32809

City/State and Zip Code

breniquebannister@gmail.com

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

For further information concerning this matter, please call:

Brenique Bannister

954
at ()

682-7480

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

2023 OCT 19 PM 1:24

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

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.

MGR = Manager
AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Only Changing Principal Address

2013 OCT 15 PM 1:24

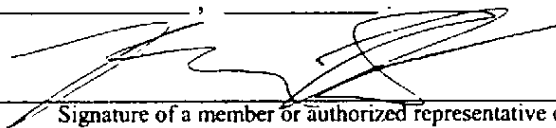
E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 October, 5



Signature of a member or authorized representative of a member

Brenique Bannister

Typed or printed name of signee