L21000473576

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



900402078899

02/14/23--01013--027 **25.00

2023 FEB 14 PM 3: 09
STATE TABLE TO SEE, FL

COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO:	Registration Se Division of Cor			
eun icz	`	nagement LLC		
SUBJEC	-1; <u></u>	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	_	
Please re	tum all correspo	ndence concerning this matter	to the following:	
		Hunter T.		
			Name of Person	
		ZenBusiness INC		
			Firm/Company	
		336 E. College Ave Suite	301	2023
			Address	TEB FEB
		Tallahassee, FL 32301		=
		fulfillment@zenbusiness.co	City/State and Zip Code om to be used for future annual report notificati	PH 3: 09
For furth	er information co	oncerning this matter, please on	·	O9
Hunter '	T. c/o ZenBusine	ess INC	844 493-6249	
	Name of	l Person	at () Area Code Daytime Tel	ephone Number
Enclosed	l is a check for th	ne 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 S	Section	Street Address: Registration Section	
	Division of C	orporations	Division of Corpora	#110112

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Drashti Management LLC		
(Name of the Limited Liability Comp. (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 11-15-2021	and assigned
Florida document number L21000473576		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3602 Data DR	023
(Principal office address MUST BE A STREET ADDRESS)	301	
	Tampa, FL 33613	- P
Enter new mailing address, if applicable:	3602 Data DR	OF S
(Mailing address MAY BE A POST OFFICE BOX)	301	7. 7. 5.0
	Tampa, FL 33613	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	nddress on our records, <u>enter the</u>	name of the new registered
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
New Degletaned Agent's Signature if shancing Desired Agent's	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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MITULBHAI M PATEL	3602 Data Dr	□Add
		APT # 301	□Remove
		Tampa, FL 33613	■ Change
AMBR	Kinnari Patel	3602 Data Dr	-
		APT # 301	
		Tampa, FL 33613	Change
			DAdd
			□Remove
			□Change
			□Adđ
			Reprove
	<u></u>		L Add 3:00ve
			□ Change
			□Add
			□Remove

		-
		
	ate of filing:	(optional) 90 days after filing.) Pursuant to 605.020
te: If the date inserted in this block cument's effective date on the Department specifies a delayed effective decord specifies a delayed effective decord specifies and delayed effective effective delayed effective eff	k does not meet the applicable statutory filing require	
te: If the date inserted in this block cument's effective date on the Department's effective date on the Department's effective date of specifies a delayed effective distilled.	k does not meet the applicable statutory filing require artment of State's records. date, but not an effective time, at 12:01 a.m. on the ea	arlier of: (b) The 90th day after the
te: If the date inserted in this block cument's effective date on the Depa ecord specifies a delayed effective d s filed.	k does not meet the applicable statutory filing require artment of State's records.	arlier of: (b) The 90th day after the
te: If the date inserted in this block cument's effective date on the Department's effective date on the Department's effective date of specifies a delayed effective date filed. Tebruary 6	k does not meet the applicable statutory filing require artment of State's records. date, but not an effective time, at 12:01 a.m. on the each of the state of t	arlier of: (b) The 90th day after the
te: If the date inserted in this block cument's effective date on the Department's effective date on the Department's effective date of specifies a delayed effective date is filed. Tebruary 6	k does not meet the applicable statutory filing require artment of State's records. date, but not an effective time, at 12:01 a.m. on the engage of the control of the con	arlier of: (b) The 90th day after the

Filing Fee: \$25.00