LZZ 000104826

(Requestor's Name)	
(Address)	
(1007000)	
(Address)	
(City/State/Zip/Phone #)	
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DISCUSSION DISCUSSION	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Entity Warner	
(Document Number)	
Continue Continue of Chabin	
Certified Copies Certificates of Status	
Canada Instructions to Filip Officer	
Special Instructions to Filing Officer:	

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of 4/1/2022

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	SEBRING	123. LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		JYOTHI RANI CHADA		
			Name of Person	
		SEBRING 123, LLC		
			Firm/Company	· · ·
		110 ROBIN NEST DR		
			Address	
		OVIEDO, FL 32765		
			City/State and Zip Code	
		RAJPALM@OUTLOOK.C	OM to be used for future annual report notific	ation)
For furt	her information co	oncerning this matter, please ca		
	II RANI CHADA		407 920-9597	
Name of Person			at () Area Code Daytime T	Celephone Number
Enclose	d is a check for th	ne following amount:		
≡ \$2 5	.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 Addres Registration S		Street Address: Registration Secti	ion

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

FLED

2022 HAR 21 PM 12: 16

SEBRING 123, LLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	mpany were filed	on03/03/2022	and assigned
Florida document number L22000104826			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability compa	nny here:	
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRI	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
R If amending the registered quent and/or registered	office address on	our records, enter t	the name of the new registered
ida document number			
	to amend the following: ter the new name of the limited liability company here: hable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." s address, if applicable: UST BE A STREET ADDRESS) s, if applicable: A POST OFFICE BOX) red agent and/or registered office address on our records, enter the name of the new registered itered office address here: istered Agent:		
Name of New Registered Agent:			
New Registered Office Address:			
	Eni	er Florida street address	
		, Flo	rida
	·		Zip Code
New Registered Agent's Signature, if changing Registered	Agent:		
provisions of all statutes relative to the proper and co accept the obligations of my position as registered ago	mplete performan ent as provided fo	ice of my duties, an or in Chapter 605, I	d I am familiar with and F.S. Or, if this document is

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
MGR	RAJITHA J VANTERU	3443 MASON VIEW DR NE	= Add
		GRAND RAPIDS. MI 49525	_
			□Change
 			□Add
			□Remove
			□Change
			□Add
		 	Remove
		4	Change
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(If an effe Note:	ective date is lis If the date ins	ther than the osted, the date must serted in this bloe date on the De	be specific ck does no	and cannot be poor of meet the app	rior to date of fi plicable statut	ling or more th ory filing req	(optio an 90 days after uirements, this	filing.) Pursuant t	o 605.0207 (3 e listed as th
he record ord is fil		lelayed effective	date, but	not an effectiv	e time, at 12:	01 a.m. on th	e earlier of: (b)	The 90th day	after the
Dated .	03-17-2022			_,	 .				
		,-	h. jui	othi Ran	ū				
			Signature o	of a member or a	uthorized repre	sentative of a	member		
	IV OTELL	DANIL CITATO							
	MIOM	RANI CHADA			rinted name of				_ <u></u>