

h22 000107712

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(Business Entity Name)

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2022 AUG -4 PM 3:27  
SEC. OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** RAM SETU LLC

\_\_\_\_\_  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

ANKUR GARG

\_\_\_\_\_  
Name of Person

RAM SETU LLC

\_\_\_\_\_  
Firm/Company

10018 SERENE WATERS COURT

\_\_\_\_\_  
Address

ORLANDO, FL 32836

\_\_\_\_\_  
City/State and Zip Code

ankur.neurology@gmail.com

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

For further information concerning this matter, please call:

ANKUR GARG

\_\_\_\_\_  
Name of Person

405 343-0025  
at ( )  
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

**2022 AUG -4 PM 3:28**

RAM SETU LLC

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

SECRETARY'S SIGNATURE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 03/02/2022 and assigned  
Florida document number L22000107712.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

13780 International Drive South

**(Principal office address MUST BE A STREET ADDRESS)**

Orlando, FL 32821

**Enter new mailing address, if applicable:**

13780 International Drive South

**(Mailing address MAY BE A POST OFFICE BOX)**

Orlando, FL 32821

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	DURGA MURDESHWAR	10018 SERENE WATERS CT	<input type="checkbox"/> Add
		ORLANDO, FL 32836	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GIAA INVESTMENTS LLC	1782 SW 132ND WAY	<input checked="" type="checkbox"/> Add
		DAVIE, FL 33325	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BHOGABHUMI INC	1265 ESTANCIA WOODS LOOP	<input checked="" type="checkbox"/> Add
		WINDERMERE, FL 34786	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	AARR FLORIDA INVESTMENTS	1400 NORTH NEW YORK AVE	<input checked="" type="checkbox"/> Add
		WINTER PARK, FL 32789	<input type="checkbox"/> Remove
		"AARR FLORIDA INVESTMENTS LLC"	<input type="checkbox"/> Change
AMBR	SMHIA LLC	275 GALA CIRCLE	<input checked="" type="checkbox"/> Add
		DAYTONA BEACH, FL 32173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	AHMED HAMADA	944 SPRING PARK LOOP	<input checked="" type="checkbox"/> Add
		CELEBRATION, FL 34747	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

\_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: 07/25/2022 (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 8/1/2022 , \_\_\_\_\_

DocuSigned by:  
Ankur Garg Signature of a member or authorized representative of a member  
OF20DF29D28B41D...

ANKUR GARG

\_\_\_\_\_  
Typed or printed name of signee