

h22000137499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

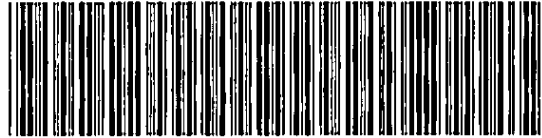
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200388208802

05/31/22-- 01011--010 \$25.00

FILED
MAY 31 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nishakara Yoga 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:

Brittney Reese
Name of Person

Nishakara Yoga LLC
Firm/Company

15420 Livingston Ave Apt. 206
Address

Lutz, FL 33559
City/State and Zip Code

brittney.pbc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brittney Reese at (909) 202-3885
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 MAY 31 PM 12:35

Nishakara Yoga LLC

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

STATE OF FLORIDA
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on March 19, 2022 and assigned Florida document number L22000137499

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:

(Principal office address MUST BE A STREET ADDRESS)

4652 E. Eastwind Dr.
Plant City, FL 33566

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4652 E. Eastwind Dr.
Plant City, FL 33566

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:

4652 E. Eastwind Dr.
Enter Florida street address
Plant City, Florida 33566
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

MGR = Manager
AMBR = Authorized Member

[illegible]

9609 MAY 31 PM 12:30
SEV-1011 SECT
TALCAHASECT

FILED
MAY 31 PM 12:35
SENIOR ASSISTANT
TALLAMOUNT

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.

Dated May 27 . 2022

Betty Ruiz
Signature of a member or authorized representative of a member

Brittney Reese
Typed or printed name of signer