

L2200018316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

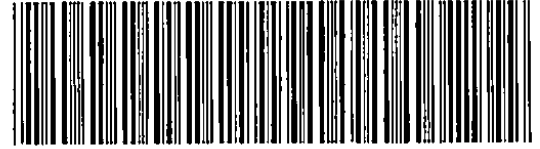
(Business Entity Name)

(Document Number)

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01/31/23--01001--002 **E

2023 JAN 30 PM 3:59
TALLAHASSEE, FLORIDA

2023 JAN 30 AM 8:21
SECRETARY OF STATE
TALLAHASSEE, FL.

**TO: Registration Section
Division of Corporations**

SUBJECT: FLORIDA GULF COAST UNIVERSITY 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:

Nairuti Jani

Name of Person

Mokshaa Solutions LLC.

Firm/Company

8754 FAWN RIDGE DRIVE

Address

FORT MYERS, FL- 33912

City/State and Zip Code

janinrealtor@gmail.com

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

For further information concerning this matter, please call:

Nairuti Jani

239

222-9631

at ()

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

TO
ARTICLES OF ORGANIZATION
OF

FILED

Florida Gulf Coast University LLC

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

2023 JAN 30 AM

SECRETARY OF S
TALLAHASSEE and assign

The Articles of Organization for this Limited Liability Company were filed on 04/18/2022

Florida document number L22000183167

This amendment is submitted to amend the following:

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

Mokshaa Solutions LLC

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:

Same as before

(Principal office address MUST BE A STREET ADDRESS)

8754 FAWN RIDGE DR
FORT MYERS, FL 33912

Enter new mailing address, if applicable:

NA

(Mailing address MAY BE A POST OFFICE BOX)

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:

Nairuti Jani

New Registered Office Address:

8754 FAWN RIDGE DRIVE

Enter Florida street address

Fort Myers,

City

Florida 33912

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 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. *NR*

If Changing Registered Agent, Signature of New Registered Agent

No Application as no change is

AMBR = Authorized Member

[illegible]

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

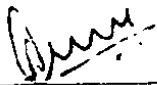
2/1

2023 JAN 30 AM 8:51
SECRETARY OF STATE
TALLAHASSEE

E. Effective date, if other than the date of filing: _____ (optional) 2/1
(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 605.020
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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 1/30/2023


Signature of a member or authorized representative of a member

Nairruti Jani

Typed or printed name of signee

Filing Fee: \$25.00