

L220000511212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

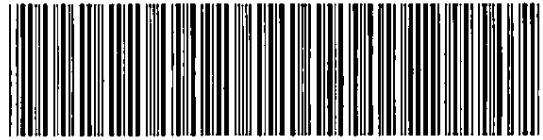
(Business Entity Name)

(Document Number)

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FLORIDA FILING & SEARCH SERVICES, INC.

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155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12/21/22

NAME: CURRY CAFÉ INDIAN CUISINE LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE





FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2022

FLORIDA FILING

SUBJECT: CURRY CAFE INDIAN CUISINE LLC
Ref. Number: L22000511212

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We have received your document for CURRY CAFE INDIAN CUISINE LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name on the Articles of Amendment does not match DOS records.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 222A00028663

Please keep Original Filing date!

Thank you!

2022 DEC 22 PM 4:09

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CURRY CAFE INDIAN CUISINE 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:

SANJEEV K PAUL

Name of Person

CURRY CAFE INDIAN CUISINE LLC

Firm/Company

4528 NORTH UNIVERSITY DRIVE

Address

LAUDERHILL, FL 33351

City/State and Zip Code

AHSBIZ@GMAIL.COM

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

For further information concerning this matter, please call:

SUNIL RAMCHANDANI

954

58420888

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

2022 DEC 21 AM 10:11

EMailed 12/20

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>
MG	SANJEEV, PAUL K	8112 NW 10TH STREET	<input type="checkbox"/> Add
		PLANTATION, FL 33322 UN	<input checked="" type="checkbox"/> Remove
		8112 NW 10TH STREET	<input type="checkbox"/> Change
MGR	PAUL, SANJEEV K	PLANTATION, FL 33322 US	<input checked="" type="checkbox"/> Add
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(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)

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 DECEMBER 20TH, 2022

Sanjay K. Paul
Signature of a member

Signature of a member or authorized representative of a member

SANJEEV K PAUL

Typed or printed name of signee

Filing Fee: \$25.00