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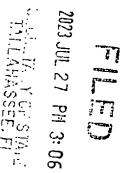
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TO: Registration S	ection :	•	• •	
Division of Co	rporations		•	
	R ENTERPRISES IV. LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	JANKI SHAH			
		Name of Person		
	MAHAVIR ENTERPRIS	ES IV, LLC		
	<del></del>	Firm/Company	<u> </u>	
	1078 JACK CALHOUN I	DR	= <u></u>	2023 JUL 2
		Address		
	KISSIMMEE, FL 34741		HAS	
	JANK124SHAH@GMAIL	City/State and Zip Code COM	## ### ###	PH G
	E-mail address: (	to be used for future annual report notification	on) (nc	3: 06
For further information of	concerning this matter, please o	all:		
JANKI SHAH		321 794-9106		
Name o	of Person	Area Code Daytime Tele	ephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Certificate of	
	certificate of status	(additional copy is enclosed)	Certified Cop (additional copy	y
Mailing Addre	ss:	Street Address:		
Registration	Section	Registration Section		
Division of C P.O. Box 632		Division of Corpora The Centre of Talla		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAHAVIR ENTERPRISES IV, 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 Company were filed on 5/16/2023 and assigned Florida document number L23000239763 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) Enter new mailing address, if applicable: (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: New Registered Office Address: Enter Florida street address

## 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>	Address	Type of Action
MGR	JANKI SHAH	1078 JACK CALHOUN DR, KISSIMMEE, FL 3474	l _ ■Add
			_ 🗆 Remove
			_ Change
MGR	KANAY SHAH	1078 JACK CALHOUN DR, KISSIMMEE, FL 3474	l _ ≣Add
			□Remove
			_
		2023	. · □Add
		2023 JUL 27 PH	_ CRemove
		27 Pt 3:	_ Change
		3: 06 E, FL	_ 🗆 Add
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ective date, if other than the deflective date is listed, the date muster. If the date inserted in this blannent's effective date on the D	it be specific and cannot be prock does not meet the app	ior to date of filing or licable statutory fil	more than 90 days aft			
cord specifies a delayed effectiv s filed.	e date, but not an effective	e time, at 12:01 a.m	on the earlier of:	(b) The	90th day	after the
ed	. 2023					
	-Janki S	hack				

Filing Fee: \$25.00