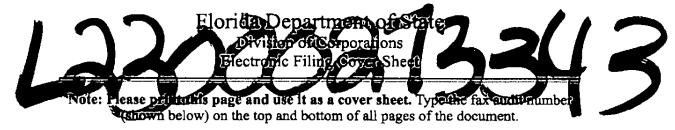
Division of Corporations



(((H23000207030 3)))



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To:

Division of Corporations

Fax Number

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone

: (855)498-5500 : (800)432-3622

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SHREE HARI MANAGEMENT LLC

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T. LEMIEUX

## COVER LETTER ...

H23000207030 3

TO: Registration Se Division of Cor					
SHREE HA	ARI MANAGEMENT LLC				
SUBJECT:	<del></del>				
The enclosed Articles of	Amendment and fee(s) are submitte	ed for filing.			
Please return all correspo	ondence concerning this matter to th	e following:			
	Chirag Kabrawala Esq				
		Name of Person			
	Kabrawala Law Group PLLC				
		Firm/Company			
	1014 W Fairbanks Avenue				
	Address				
	Winter Park, FL 32789				
	Ci	ty/State and Zip Code			
	nishant.patel@anyamana	agement.com used for future annual report notifi			
For further information c	oncerning this matter, please call:	user for future amuai report noun	Caucity		
Chirag Kahrawala		407 801-3330 at ()			
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for th	ne following amount:				
<b>■ \$</b> 25.00 Filing Fee	□ \$30.00 Filing Fee & □ Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Malling Addres	<b>u</b> .	Street Address:			
Registration S		Registration Sec	tion		
Division of C		Division of Com			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

H23000207030 3

Name of the Limited Liability (A Florida I.	Company as it now appear imited Lisbility Company)	s on our records.)			
The Articles of Organization for this Limited Liability Con			ar	nd assi	gned
Florida document number 1.23000273343	<b>-</b> •				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limite	ed liability company he	<u>re</u> :			
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the de	esignation "LLC" or the	abbreviati	ion "L.L	.C."
Enter new principal offices address, if applicable:	<u></u>				
Principal office address MUST BE A STREET ADDRE	<u></u>				
		<u>.</u>		_	
Enter new mailing address, if applicable:		<del></del>			
Mailing address MAY BE A POST OFFICE BOX)	<del></del>				
				_	
3. If amending the registered agent and/or registered o	office address on our re		ma of th	~3	rod.
gent and/or the new registered office address here:	Tince address on our re	cords, <u>enter the na.</u>	ME OF CO	Cap	I CS.
			•	;== <u>;</u>	
N. CN. D. L. L.				1	Ē
Name of New Registered Agent:		-			<u></u>
Name of New Registered Agent:			-		
Name of New Registered Agent:  New Registered Office Address:	Fater Flori	do street address	<u></u>		
-	Enter Flori	da street address	- <u>-</u>	12	
	Enter Flori	da street address, Florida		12	

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

H23000207030 3 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	MIKKY K PATEL	2425 Frontage Road	□Add
		Davenport, Florida 33837	N Remova
			□Change
MGR	KIRANBHAI C PATEL	2425 Frontage Road	X Add
		Davenport, Florida 33837	□Remove
		<del></del>	□Change
MGR	NISHANT PATEL	2425 Frontage Road	NAGE:
		Davenport, Florida 33837	□Remove
			☐ Change
			□Remove
			Change
			©Remove
			Change
			□Remove
			□Change

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<u>e:</u> If the da	ite inserted in thi	the date of filin must be specific an s block does not e Department of	meet the applic	able statutory	or more than 90 da filing requireme	(optional)  ays after filing.)  nts, this date	Pursuant to 605.02 will not be listed a
cord specifi s filed.	es a delayed effe	ctive date, but no	ot an effective t	ime, at 12:01 a	.m. on the earlie	erof:(b) The	90th day after th
ed Jun	e 7		.,2023				
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		/*/	BIN				

Filing Fee: \$25.00

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