

L23000304391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

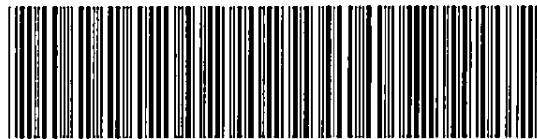
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/06/24--01009--021 **25.00

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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **TRANSFER THE PERCENTAGE FOR RAYZA LLC TO SHIVAM P PATEL**

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:

SHIVAM P PATEL

Name of Person

RAYZA LLC

Firm/Company

25119 DERBY DR.

Address

SORRENTO, FL - 32776.

City/State and Zip Code

SHIVAMLIQUOR1@GMAIL.COM

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

For further information concerning this matter, please call:

SHIVAM P PATEL

224 279-9101
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

RAYZA L.L.C.

Page 1 of 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>	<u>Address</u>	<u>Type of Action</u>
MGR	PARESH D. PATEL	33555 TERRAGONA DR.	<input type="checkbox"/> Add
		SORRENTO, FL - 32776.	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RUPAL U. PATEL	25119 DERBY DR.	<input type="checkbox"/> Add
		SORRENTO, FL - 32776.	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	ZALAK Y. PATEL	25119 DERBY DR.	<input type="checkbox"/> Add
		SORRENTO, FL - 32776.	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

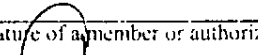
(b) The 90th day after the record is filed.

Dated JUNE/01/2024. 2024



Signature of a member or authorized representative of a member

SHIVAM P. PATEL.



Typed or printed name of signee