

L23 000 331537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

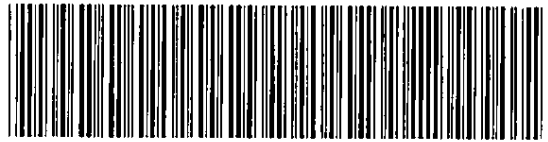
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2024 MAR -5 PM 12:29

CLERK OF COURT
HARRISBURG, PA

CF



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2024

AMARASINGHI NADARASA
172 MAGNOLIA PARK TRAIL
SANFORD, FL 32773

SUBJECT: THE MAHAL, LLC
Ref. Number: L23000331537

FILED
2024 MAR -5 PM 12:29
TALLAHASSEE, FL

We have received your document for THE MAHAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Kiora Hester
Regulatory Specialist II

Letter Number: 824A00003861

Kiora.hester@dos.myflorida.gov

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Mahal, 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:

Amarasinghi Nadarasa

Name of Person

The Mahal, LLC

Firm/Company

172 Magnolia Park Trail

Address

Sanford, FL - 32773

City/State and Zip Code

amarasinghi@yahoo.com

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

For further information concerning this matter, please call:

Amarasinghi Nadarasa

407

9850591

Name of Person

at ()

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

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2024 MAR -5 PM 12:29

TALLAHASSEE, FL

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

The Mahal, 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 07/13/2023 and assigned

Florida document number 1.23000331537

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" or the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

172 Magnolia Park Trail

(Principal office address MUST BE A STREET ADDRESS)

Sanford, FL - 32773

Enter new mailing address, if applicable:

172 Magnolia Park Trail

(Mailing address MAY BE A POST OFFICE BOX)

Sanford, FL - 32773

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

Florida

City

Zip Code

Signature of Registered Agent, if changing Registered Agent:

I, _____, 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 competent to perform the duties 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

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TALLAHASSEE, FL

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>
AR	SUWARNAKKUMARI	7901 4TH ST N STE 4000	☐ Add
		ST PETERSBURG, FL 33702	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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TALLAHASSEE, FL
CLERK OF DISTRICT COURT

2024 MAR -5 PM 12:29
TALLAHASSEE, FL

100

2024 MAR -5 PM 12:29
TALLAHASSEE, FL

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 05 March 2024

Signature of a member or authorized representative of a member

1. MARASINATHI NADARASA
Typed or printed name of signee