

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

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(((H24000125501 3)))



H240001255013ABCU

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GANDD ENTERPRISE DIVERSIFIED LLC  
Account Number : 120240000017  
Phone : (678)788-5956  
Fax Number : (404)393-3668

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

Email Address: ganddenterprise1@gmail.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MAHASHV LLC**

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Certified Copy	1
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2024 APR -5 PM 12:04

FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2024 APR -5 PM 12:39

APR 08 2024

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T. LEMIEUX

**COVER LETTER**

TO: **Registration Section**  
**Division of Corporations**

H24001255013

SUBJECT: **MAHASHV 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:

Donna Forbes

\_\_\_\_\_  
Name of Person

gandd Enterprise Diversified LLC

\_\_\_\_\_  
Firm/Company

2524 Brittany Park Lane

\_\_\_\_\_  
Address

Ellenwood, GA 30294

\_\_\_\_\_  
City/State and Zip Code

ganddenterprise1@gmail.com

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

For further information concerning this matter, please call:

Donna Forbes

678

788-5956

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

ARTICLES OF AMENDMENT  
TO H 2400012 55013  
ARTICLES OF ORGANIZATION  
OF

MAHESHV 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 7-26-24 and assigned Florida document number L24000147535.

**This amendment is submitted to amend the following:**

**A. If amending name, enter the new name of the limited liability company here:**

MAHASHIV LLC

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

Civ

**, Florida**

**Zip Code**

**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**



11240001255013

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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)

**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.

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 \_\_\_\_\_, \_\_\_\_\_.

Yari

Signature of a member or authorized representative of a member

Sangeeta Gandhi

Typed or printed name of signee