# L24000161885

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## **CORPORATE** ACCESS,

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236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

#### WALK IN

PICK UP: **MISTY 4/18** CERTIFIED COPY XX**PHOTOCOPY CUS**  $\mathbf{X}\mathbf{X}$ LLC AMEND FILING **GANPATI BAPPA LLC** 1. (CORPORATE NAME AND DOCUMENT #) 2. (CORPORATE NAME AND DOCUMENT #) 3. (CORPORATE NAME AND DOCUMENT #) 4. (CORPORATE NAME AND DOCUMENT #) 5. (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) **SPECIAL INSTRUCTIONS:** 

#### **COVER LETTER**

TO:	Registration Se Division of Cor					
SUBJI		BAPPA LLC				
30031		Name of Lim	ited Liability Company	,		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ondence concerning this matter	to the following:			
			SAHIL D PATEL			
			Name of Person			
		GA	ANPATI BAPPA LLC			
	Firm/Company					
	2505 CROSS MORE ST					
	Address					
	VALRICO, FL 33594					
	City/State and Zip Code					
		durantfood E-mail address: (i	fication)			
For fur	ther information c	oncerning this matter, please ca	-	incation)		
SAHII			813 5312143 at ( )			
	Name o	f Person		e Telephone Number		
Enclose	ed is a check for th	ne following amount:				
<b>■</b> \$2:	5.00 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 S		Street Address: Registration Sec	ction		

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

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 APR 18 AM 11: 49

(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 GANPATI BAPPA LLC Florida document number <u>L24000161885</u> 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.

\_, Florida \_

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>	Name	Address	Type of Action
AMBR	KHUSHI D PATEL	2505 CROSS MORE ST	□Add
		VALRICO, FL 33594	■Remove
			□Change
<del></del>			□Add
			□Remove
			□Change
			□Add
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If an ef <u>Note:</u>	fective date, if other than the date of filing:
e recor	rd 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 led.
Dated	04-16-2024
	& abil Detal
	Signature of a member // authorized representative of a member