

L22000229636

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

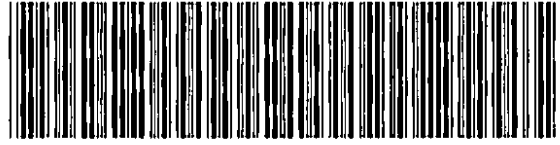
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SECRETARY OF
TALLAHASSEE, FL 32301

2022 JUN -9 PM 2:41

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SECRETARY OF
TALLAHASSEE, FL

2022 JUN -9 AM

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EILAND 36750 INVESTMENT 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:

AJAY PATEL
Name of Person
EILAND 36750 INVESTMENT LLC
Firm/Company
36750 EILAND BLVD
Address
ZEPHYRHILLS,FLORIDA.33541
City/State and Zip Code
AAAA_007@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AJAY PATEL at (813) 786-7046
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
ARTICLES OF ORGANIZATION
OF**

FILED

2022 JUN -9 AM 10: 15

EILAND 36750 INVESTMENT LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/25/2022 and assigned Florida document number L22000229636.

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

_____, Florida _____

City

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 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.

Ajay V. Patel

If Changing Registered Agent, Signature of New Registered Agent

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>
AMBR	A&H INVESTMENT LLC	4350 HIGHCROFT DR	<input type="checkbox"/> Add
		WESLEY CHAPEL,FL.33545	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	AJAY PATEL	4350 HIGHCROFT DR	<input type="checkbox"/> Add
		WESLEY CHAPEL,FL.33545	<input type="checkbox"/> Remove
		AMGR TO AMBR	<input checked="" type="checkbox"/> Change
AMBR	HIMANSHU PATEL	5224 SUNRIDGE PALMS DR	<input checked="" type="checkbox"/> Add
		TAMPA,FL.33617	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	UMESH PATEL	111 HEATHIER DR	<input checked="" type="checkbox"/> Add
		HOPEWELL JUNCTION,NY.12533	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RAVI HOTCHANDANI	11 SETTLERS COURT	<input checked="" type="checkbox"/> Add
		POUGHKEEPSIE,NY.12603	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RASHMIKANT R PATEL	104 PAINTED HOURSE TRAIL	<input checked="" type="checkbox"/> Add
		WACO,TX.76712	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

NEEDS TO ADD ADDITIONAL AMBR FROM HERE:

AMBR KRISHNA TRADING LLC ADDRESS : 19221 BRIARBROOK DR.TAMPA,FL.33647

AMBR BHAVIK VALA ADDRESS: 30246 SOUTHERNWOOD CT,WESLEY CHAPEL,FL.33543

CHANGE OF ADDRESS FOR AMBR FROM HERE:

AMBR DEEPESH PATEL ADDRESS : 128 SUNFLOWER CIR,WAPPINGERS FALLS,NY.12590

E. Effective date, if other than the date of filing: 05/25/2022 **(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 8TH JUNE 2022

Ajay v. Patel

Signature of a member or authorized representative of a member

AJAY PATEL

Typed or printed name of signee