

Division of Corporations

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L20000118361

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
5 STAR JET SKI RENTALS LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

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Y 011117

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5 STAR JET SKI RENTALS 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 09/17/2012 and assigned Florida document number L12000118361

This amendment is submitted to amend the following:

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

Yoniro 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:

501 Mirasol Cir., Apt 414

(Principal office address MUST BE A STREET ADDRESS)

Kissimmee, Florida 34747

Enter new mailing address, if applicable:

501 Mirasol Cir., Apt 414

(Mailing address MAY BE A POST OFFICE BOX)

Kissimmee, Florida 34747

2020 JAN -2 AM 11:03 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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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:

501 Mirasol Cir., Apt 414

Enter Florida street address

Kissimmee

Florida 34747

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 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

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	Maksym Fomin		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		501 Mirasol Cir., Apt 414 Kissimmee, Florida 34747	<input checked="" type="checkbox"/> Change
AMBR	Evgeniia Fomina		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		501 Mirasol Cir., Apt 414 Kissimmee, Florida 34747	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

