

C14000005307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers DEC 22 2014

1/11

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REMAKS, 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:

NEIL MILESTONE

Name of Person

MUROFF, MILESTONE AND MILESTONE

Firm/Company

2999 Northeast 191st Street, Suite 709

Address

Aventura, FL 33180

City/State and Zip Code

askoinc@gmail.com

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

For further information concerning this matter, please call:

Neil Milestone

at (**305**) **682-2324**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGR	NATALIA ROGALSKAYA	1990 NE 163rd STREET, SUITE 200	<input type="checkbox"/> Add
		NORTH MIAMI BEACH, FL 33162	<input checked="" type="checkbox"/> Remove
MGR	ANATOLY PETUKHOV	11098 BISCAYNE BLVD., SUITE 401	<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA 33161	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

The Company shall be a manager managed company.

E. Effective date, if other than the date of filing: January 11, 2014 **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated December 17, 2014

Signature of a member or authorized representative of a member

ANATOLY PETUKHOV

Typed or printed name of signee

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Filing Fee: \$25.00

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