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## **COVER LETTER**

TO: Registration Se Division of Cor		et a	
SUBJECT: <u>Sur</u>	ayyo Rakl	nmatulaeug  ited Liability Company	LLC
The enclosed Articles of	Amendment and fec(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Surayy	D Raulymatu Name of Person	llaeva
	Surayyo R	Name of Person  Quantity  Action  Acti	, LLC
	4352 5	KIYKM OIN Address	Rd, #1208
		City/State and Zip Code  OFU OFU OFU OFU	
		74 a yahoo. to be used for future annual report notif	fication)
For further information co	oncerning this matter, please ca	all:	
Sur au Name o	Person	at (407) 979 Area Code Daytimo	7752 e Telephone Number
Enclosed is a check for th	e 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

**MAILING ADDRESS:** 

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Surayyo R	achmatylaeva, LLC
( <u>Name of the Limited</u> (A	Llability Company as it now appears on our records.) Florida Limited Liability Company)
This amendment is submitted to amend the follow	(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  ration for this Limited Liability Company were filed on June 21, 2017 and assigned over 17,000 134750  mitted to amend the following:  , enter the new name of the limited liability company here:  inguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  ffices address, if applicable:  ISS MUST BE A STREET ADDRESS)  dress, if applicable:  The A POST OFFICE BOX)  registered agent and/or registered office address on our records, enter the new registered office address here:
A. If amending name, enter the new name of th	ne limited liability company here:
The new name must be distinguishable and contain the word	(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  Organization for this Limited Liability Company were filed on June 21, 2017 and assigned at number 17,000 134750  is submitted to amend the following:  name, enter the new name of the limited liability company here:  the distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.LC." or the abbreviation "L.LC.
Enter new principal offices address, if applicabl	le:
(Principal office address MUST BE A STREET /	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	DX)
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, enter the name of the new e address here:
Name of New Registered Agent:	
New Registered Office Address:	
-	, Florida

## 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 Title Name **Address Type of Action** Surayyo Raxhmatullaeva PRES 4352 S. Kirkman Rd #1208 Orlando, De 32811 ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change ☐ Add ☐ Remove Remove ☐ Change □ Add ☐ Remove ☐ Change DbA □ ☐ Remove ☐ Change

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ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more that lote:  If the date inserted in this block does not meet the applicable statutory filing requirements of filing or more than the Department of State's results.	(optional) n 90 days after filing.) Pursuant to 605.	.02
ocument's effective date on the Department of State's records.	irements, this date will not be liste	d a
e record specifies a delayed effective date, but not an effective time, The 90th day after the record is filed.		r of
ated July 23 , 2017 .  Signature of a member or authorized representative of a member of a		

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Filing Fee: \$25.00