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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Fax Number

: (855)330-1010

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

Email	Add	FAC	٠.	
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GOLDMAN GROUP LLC**

Certificate of Status	0
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Estimated Charge	\$25.00

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MAY 05 2020

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GANIZATION	:		
	2020 HAY -4	PH 2: 14	

		' ''' 2: [4
GOLDMAN GROUP LLC	1975 1975	· •
(Name of the Limited (/	1 Liability Company as it now appears on our records.) A Florida Limited Liability Company)	1
he Articles of Organization for this Limited Lia orida document number L20000102952	bility Company were filed on 04/14/2020	and assigned
his amendment is submitted to amend the follow	wing:	
. If amending name, enter the new name of (	the limited liability company here:	
Sundo Group LLC		
he new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applica	ble:	
Principal office address MUST BE A STREET	ADDRESS)	
Inter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE B</u>	<u>OX</u> )	
. If amending the registered agent and/o egistered agent and/or the new registered offi	r registered office address on our records, ent ice address here:	er the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:	Enter Florida street 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 = N $AMBR = A$	lanager authorized Member	2020 FLAY	
<u>Title</u>	<u>Name</u>	Address	Pri Type of Action
MGR	Mariia Laliani	7901 4TH ST N STE 300	🖸 Add
		ST. PETERSBURG, FL 33702	Remove
			☐ Change
AMBR	Yuliia Hordiienko	7901 4TH ST N STE 300	□ Add
		ST. PETERSBURG, FL 33702	☐ Remove
			☐ Change
			Remove
			Change
			D Add
			□ Remove
			Change
			Remove
			Change
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	2020 MAY - 4 PM 2: T4
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<del></del>	
Tective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to datote: If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed a
record specifies a delayed effective date, but not an The 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlier
April 27 2020	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00