

LZO 000148914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

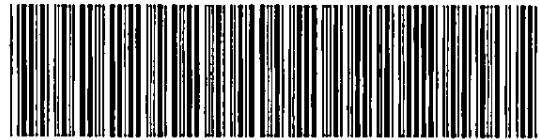
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100353161311

10/05/20--01018--006 **30.00

2020-10-05 PM 1:05

C. GOLDEN

NOV 13 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: XVERUM 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:

Yuval Kotzer
Name of Person

Xverum LLC
Firm/Company

2801 Greene St, Suite # 2
Address

Hollywood FL 33020
City/State and Zip Code

Yuval@xverum.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yuval Kotzer 954 665-7442
Name of Person at (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

2020 -5 PM 1:05

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Xverum 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 06/01/2020 and assigned Florida document number L20000148914.

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:

2801 Greene St., Suite # 2

(Principal office address MUST BE A STREET ADDRESS)

Hollywood, FL 33020

Enter new mailing address, if applicable:

2801 Greene St., Suite # 2

(Mailing address MAY BE A POST OFFICE BOX)

Hollywood, FL 33020

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:

2801 Greene St., Suite # 2

Enter Florida street address

Hollywood

City

Florida 33020

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>
MBR	M.R. LITVENKO HOLDINGS, L1	5911 SHADY OAK LANE, SUITE 3, FORT LAUDEFL	<input type="checkbox"/> Add
		5911 SHADY OAK LN, Slt #3, FL. Lauderdale, FL 33312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	KOTZER, YUVAL	5911 SHADY OAK LANE, SUITE 3, FORT LAUDEFL	<input type="checkbox"/> Add
		5911 SHADY OAK LN, Slt # FL Lauderdale, FL 33312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

