

2/15/2021

Division of Corporations

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 : GASSMAN, CROTTY & DENICOLA, P.A.
Account Number : 075350000514
Phone : (727)442-1200
Fax Number : (727)443-5829

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
LINDSTROM LLC

Certificate of Status	0
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Corporate Filing Menu

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2/16/21

FILED

2021 FEB 15 PM 4:49

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

LINDSTROM LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

10/14/2020

The Articles of Organization for this Limited Liability Company were filed _____ and assigned
on Florida document number L20000325530.

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: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

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: _____

Enter Florida street address

Florida

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

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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	KIRA GEKHT	2750 STICKNEY POINT ROAD, #109	<input type="checkbox"/> Add
		SARASOTA, FL 34231	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	EMILIYA SHKLYAR	2750 STICKNEY POINT ROAD, #109	<input checked="" type="checkbox"/> Add
		SARASOTA, FL 34231	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	GENNADY GEKHT	299 ROBIN DR	<input type="checkbox"/> Add
		SARASOTA, FL 34236	<input checked="" type="checkbox"/> Remove
			<input checked="" 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

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

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E. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 15, 2021

Signature of a member or authorized representative of a member

Alan S. Gassman, Authorized Representative
Typed or printed name of signer

Filing Fee: \$25.00