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| Certified Copies        | _ Certificates      | s of Status    |
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| Special Instructions to | Filing Officer:     |                |
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Office Use Only



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K.SALY EXAMINER

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## **COVER LETTER**

| TO: Registration Se<br>Division of Cor |  |   |  |
|--|--|---|--|
| Skirt Line :                           |  |   |  |
| SUBJECT:                               | Name of Limi                               | ited Liability Company  | <del></del>  |
| The enclosed Articles of               | Amendment and fee(s) are sub-              | mitted for filing.  | •  |
| Please return all correspo             | ondence concerning this matter             | to the following:   |  |
|  | Andrei Dzengluk                            |   |  |
|  | <del> </del>                               | Name of Person  |  |
|  | Skirt Line LLC                             |   |  |
|  | · · · · · · · · · · · · · · · · · · ·      | Firm/Company  |  |
|  | 2427 NE 10 St                              |   |  |
|  |  | Address   |  |
|  | Hallandale Beach, FL 3300                  | )9  |  |
|  |  | City/State and Zip Code   |  |
|  | Hi_TechPainting@yahoo.co                   | om<br>to be used for future annual report notifi                    | cation)  |
| For further information of             | concerning this matter, please ca          | ·   |  |
| Andrei Dzengluk                        |  | 305 766-4646<br>at ()   |  |
| Name o                                 | of Person                                  | Area Code Daytime   | Telephone Number   |
| Enclosed is a check for t              | he 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Skirt line LLC

(Name of the Limited Liability Company as it now appears on our records,

|   |  | ORTE,                     |
|---|--|---------------------------|
| The Articles of Organization for this Limited Liability Company Florida document number L13000115265  | were filed on                          | and assigned              |
| This amendment is submitted to amend the following:   |  |                           |
| A. If amending name, enter the new name of the limited liab   | ility company here:                    |                           |
| Gluk LLC  |  |                           |
| The new name must be distinguishable and contain the words "Limited Liabil  | ity Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   | <del></del>                            |                           |
| (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 of registered agent and/or the new registered office address here.  Name of New Registered Agent:                                 |  | nter the name of the new  |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:  New Registered Office Address: | ₫:                                     | nter the name of the new  |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:  New Registered Office Address: |  | nter the name of the new  |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:  New Registered Office Address: | Enter Florida street address           |                           |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:  New Registered Office Address: | Enter Florida street address           |                           |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:  New Registered Office Address: | Enter Florida street address           |                           |

If Changing Registered Agent, Signature of New Registered Agent

| If amending  | Authorized Person(s) authorized to ma<br>from our records: | anage, <u>enter the title, name, and address of each perso</u> | n being added |
|--------------|--|--|---------------|
| MGR = M      | <del></del> '  | Address  Address  Address  Address  Address                    |               |
| <u>Title</u> | <u>Name</u>  | Address Schaffer Ph 1: 48 Ty                                   | e of Action   |
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| effective date is listed, the date must<br>: If the date inserted in this blo | be specific and cannot be prior to date of filing ck does not meet the applicable statutory partment of State's records. | (optional) g or more than 90 days after filing.) Pursuant to 605.02 y filing requirements, this date will not be listed |
| ecord specifies a delayed<br>ne 90th day after the reco                       |  | ive time, at 12:01 a.m. on the earlier  |
| February 22   | 2016   |   |
| u   |  |   |
|   | The state of   |   |
|   | A AMOUNT   |   |

Page 3 of 3

Filing Fee: \$25.00