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J. HARRIS

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Mia	MI 77 LLC		
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	unitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Serg	ey Ilchenko	 .
	Λ.	Mi 77 LL C Firm/Company	
	16950 Nor	th bay road	apt 601
	SUNNY 1	Sles beach, City/State and Zip Code	FL33160
		flosmail. con	
For further information of	oncerning this matter, please ca	all:	
Sergey II	Che NRO	at (<u>786</u>) 67 Area Code Daytin	88220 ne Telephone Number
Enclosed is a check for the	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

/MIAMI 77 LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company Florida document number 1, 1700052210	were filed on 8:0	O AM 03/06/2017 and assigned
riorida document number <u>G 1 7000032210</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
N/A		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	28 3
(Principal office address MUST BE A STREET ADDRESS)		APP A
		5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -
		TE B
Enter new mailing address, if applicable:	N/A	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u>Б</u> Т
	,	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: N//4		records, enter the name of the new
New Registered Office Address: N/A		
	Enter Florida st	reet address
N/A		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my a rovided for in Chap	luties, and I am familiar with and ter 605, F.S. Or, if this document is
N/A If Chan		ignature 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> **Address Type of Action** AR NATALIA ILCHENKO □ Add 16950 North bay road aft 601 Sunny Isles Bremove ☐ Change _ 🗆 Add ☐ Remove _□ Change □ Add _□ Remove _□ Change _ 🗆 Add □ Remove ☐ Change ☐ Remove □ Change

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		3. Ch		ure of a n	AMBR nember or au	SE:	KGEY	ILCHE	NKO	SE	_ဌ

Page 3 of 3

Filing Fee: \$25.00