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(Re	questor's Name)	
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	d)	
(Aa	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	,
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Div	ision of Corp	orations			
SUDJECT.	PROPERTY	'INVESTMENTS LLC			
SUBJECT: Name of Limited Liability Company					
The enclosed	l Articles of A	Amendment and fee(s) are subr	nitted for filing.		
Please return	all correspoi	ndence concerning this matter t	to the following:		
		VITALIY PERSHIN			
			Name of Person		
			Firm/Company		
	7144 STIRLING RD #173				
			Address		
		HOLLYWOOD FL 33024			
			City/State and Zip Code		
		BUYINGFORCASH@GM/	AIL.COM		
		E-mail address: (t	o be used for future annual report no	tification)	
For further in	nformation co	ncerning this matter, please ca	d1:		
VITALIY P	ERSHIN		954 614-0878 at ()		
	Name of	Person	Area Code Dayti	me Telephone Number	
Enclosed is a	n check for th	e following amount:			
\$25.00 F	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:

J TO:

Registration Section

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

PROPERTY INVESTMENTS LLC (Name of the Limited Liability Company as it now appears on our records,)
(A Florida Limited Liability Company) and assigned Florida document number ______L11000088838 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PERSHIN SFH LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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

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.

Cin

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>	Name	Address	Type of Action
			☐ Remove
			Change
			Add
			☐ Change
			□ Remove
			□ Change
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Effective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than some state. If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	(optional) 90 days after filing.) Pursuant to 605.0207 ements, this date will not be listed as
ne record specifies a delayed effective date, but not an effective time, a The 90th day after the record is filed.	t 12:01 a.m. on the earlier of
Dated	
Signature of a member or authorized representative of a men	nber
Vitaliy PERSNi Typed or printed name of signee	io

Page 3 of 3

Filing Fee: \$25.00