L14 000017837

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(Address)
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COVER LETTER

TO: Registration Se Division of Cor			s · · · · · · · · · · · · · · · · · · ·
OZANIKA	LLC		•
SUBJECT:	Name of Lun	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	unuted for filing	
Please return all correspo	ondence concerning this matter	to the following:	
	Alexander Ozhigov		
		Name of Person	
		Firm Company	
	301 N BRYAN ROAD, FI	. 33004	
		Address	
	DANIA BEACH, FL 3300	14	
	ozanikalle(@gmail.com	City State and Zip Code	•
	E-mail address: (to be used for future annual report no	otification)
For further information c	oncerning this matter, please of	aft:	
Alexander Ozlugov		786 6139218	
Name o	r Person	at c) Area Code — Davti	me Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	14 \$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		<u>Street Address:</u> Registration S	Section
Registration 9 Division of C		Division of Co	

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OZANIKA LLC			
(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Con	appears on our records.) upany)	
The Articles of Organization for this Limited I Torida document number 4.14000017837			and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability comp	any here:	
he new name must be distinguishable and contain the	words "I mitted Liability Company	c" the designation "LLC" or the a	
Enter new principal offices address, if appli	cable:		2020
Principal office address MUST BE A STRE.	<u>ET ADDRESS)</u>		2020 DEIC
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u>			7 Fri 77
 If amending the registered agent and/or agent and/or the new registered office address. 		i our records, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:	Alexander Ozhigov		
New Registered Office Address:	301 N. Bryan Rd	uter I forda stryet address	
	Dania Besch		3004

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, it this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

City

It 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>	Type of Action
MGRM	NIKOLASHKINA, ELENA	301 N. Bryan Rd	□Add
		Dania Beach, FL 33004	■Remove
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ective date, if other than the to effective date is listed, the date must te: If the date inserted in this bloomment's effective date on the De	ck does not meet the applicable	ate of filing or more than 96 statutory filing require	(optional days after film ments, this date) g) Pursuant to 605,020 g will not be fisted as
cord specifies a delayed effective s filed.	date, but not an effective time.	at 12:01 a.m. on the ear	rher of: (b) T	he 90th day after the
November 25	2020			
	an	-		
	_	d representative of a mem		

Filing Fee: \$25.00