

W4000081620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

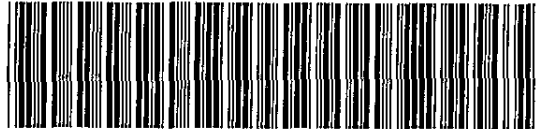
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W4-81620  
AK

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** L04000081620

(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEX SORSHER

(Name of Person)

LIBERTY TAX SERVICE

(Firm/Company)

2500-1 N STATE ROAD 7

(Address)

HOLLYWOOD, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

ALEX SORSHER

(Name of Person)

at ( 954 )

962-0011

(Area Code & Daytime Telephone Number)

Enclosed is a check for the 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).

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

2005 MAY 24 PM 11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

DEFACTO, L.L.C.

(Present Name)  
(A Florida Limited Liability Company)

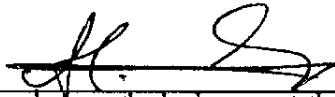
**FIRST:** The Articles of Organization were filed on NOVEMBER 2004 and assigned document number L04000081620.

**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

ARTICLE V: ALEX SORSHER RESIGNS AS MEMBER OF LLC. AS OF DATE OF THIS AMENDEMENT. NEW MEMBER SHALL BE SERGUEI ANDREUEV, ADDRESS 2500-1 N STATE ROAD 7, HOLLYWOOD FL 33021

Dated MAY 1, 2005.

2005 MAY 24 PM 1:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



\_\_\_\_\_  
Signature of a member or authorized representative of a member

\_\_\_\_\_  
ALEX SORSHER

\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00