L07000050187

(Requestor's Name)
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(City/State/Zip/Phone #)
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8/A/21

COVER LETTER

TO: Registration Se Division of Con			
FOREX, L	 LC		
SUBJECT:	Name of Lim	ited Liability Company	·
The content Amieles of	Amendment and fee(s) are sub	missad fan filina	
	ondence concerning this matter	-	
·	_		
	Ramsey Villalon		
		Name of Person	
	Mamone Villaton		
		Firm/Company	
	2525 Ponce de Leon Blvd,	Suite 300	
	 	Address	
	Coral Gables, Florida 3312	34	
		City/State and Zip Code	
	ramsey@mvlawpllc.com	to be used for future annual report noti	
For further information of	encerning this matter, please c	•	neation)
	one or ming and matter, prease o	786 441-5281	
Ramsey Villalon		at ()	
Name o	of Person	Area Code Daytim	e 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)
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 632	27	The Centre of T	allahassee

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOREX, LLC	
(<u>Name of the Limited Liabi</u> (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number L070000050187	Company were filed on May 11, 2007 and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	mited liability company here:
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, enter the name of the new registere:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
-	City Zin Code

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.

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
MGR	Iurii Pekker	19701 Old Culter Road, 309B	
		Palmetto Bay, Florida 33157	□Remove
			□ Change
			🗆 Add
			□Remove
			□Remove
			Change
			□Add
			Remove
			□Change
			□Add
			☐Remove
			□Change
			□Add
			□Remove
			∏ Changa

	
	
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Effective date, if other than the date of filing:	onal) filing.) Pursuant to 605.0207 date will not be listed as
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) d is filed.	The 90th day after the
Pated August 4 202	<u></u>
Dated August 4	127 N
1	
Signature of a intember or authorized representative of a member	
Signature of a member or authorized representative of a member Ramsey Villalon as the authorized representative of the Members	

Filing Fee: \$25.00