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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON SEP - 2 2010 EXAMINER

٠			
`		COVER LETTER	,
TO: Registrat	tion Section of Corporations	,	
SUBJECT:		yastan LLC	
	Name of Lim	ited Liability Company	
The enclosed Artic	cles of Amendment and fee(s) are su	bmitted for filing.	
Please return all co	orrespondence concerning this matte	r to the following:	
	A	nastasiya Lyubchenko	
		Name of Person	
		Firm/Company	
7540 Universal Blvd			
		Address	
		Orlando FL 32819 City/State and Zip Code	
	a	rarateuro@yahoo.com (to be used for future annual report notifica	
For Continue in Cons			ation)
ror jurther informa	ation concerning this matter, please	caii:	
	astasiya Lyubchenko	at (407) 3	51-3131
ı	Name of Person	Area Code & Daytime	Telephone Number
Enclosed is a chec	k for the following amount:		
\$25.00 Filing F	ee \$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)
ŀ	MAILING ADDRESS: Registration Section Division of Corporations	STREET/COURIE Registration Section Division of Corporat	

P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Hayastan LLC	-073
(Name of the Limited L	iability Company as it now appear lorida Limited Liability Company)	rs on our records.)
(A F	lorida Limited Liability Company)	10 Ass
The Articles of Organization for this Limited Lial	oility Company were filed on	12/04/2008 and aggnet
Florida document number L080001114	.09	1 7120
riorida document number	 ,	– 83
This amendment is submitted to amend the follow A. If amending name, enter the new name of t		OF STATE AN IO: 82
	RAT INVESTMENTS LLC	- XS
		not be a surface of the same o
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	any," the designation "LLC" or the appreviation
E.E.C.		
Enter new principal offices address, if applical	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
		
F.4		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	OX)	
		Approx. Control of the control of th
		
B. If amending the registered agent and/or	registered office address on o	our records, enter the name of the nev
registered agent and/or the new registered office		<u> </u>
The state of the s	The state of the s	
Name of New Registered Agent:		
rame of few registered rigent.		
New Registered Office Address:		
Hew respired office readess.	En	ter Florida street address
	En	ior a toriuu sireet uuuress
		. Florida
	City	Zip 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 608, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>D</u>	Anastasiya Lyubchenko	7540 Universal Blvd Orlando FL 32819	Add Remove
MGR_	Arshak Adamyan	3190 Dante Dr #207 Orlando FL 32835	Add Remove
MDR	Vardan Ter -Martirosyan	4308 S Kirkman Rd #1708 Orlando FL 32811	Add Ø Remove
 -			Add Remove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	FILED SECRETARY OF SECRETARY OF CORP
Dated	~	010 . AD_C	OF STATE RPORATIONS AM 10: 92
	Arshak Ada	er or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00