L090000/8360

(Requestor's Name)				
(Address)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Endy Name)				
(Document Number)				
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SECRETARY OF STATE

N. Compan APR 16 2000

COVER LETTER

	ion Section of Corporations		
SUBJECT: ABU	JNDANCE ALLIANCE	ELLC	
	(Name	of Limited Liability Co	mpany)
Dear Sir or Madan	n:		
The enclosed Artic	cles of Correction and fee(s) a	are submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the followin	g:
Yevgeniya Fı	redericksen		_
	(Name of Person)	,	_
	(Firm/Company)		_
30 Poppy Ln	(Address)		·····
Palm Coast, Fl			
T dill Oodst, 1 1	(City/State and Zip Code)	N - 144 - 14	-
For further inform	ation concerning this matter,	please call:	
	ericksen (Jenny)	at (at)	313-1364
(Name of Person)	(Area Code a	& Daytime Telephone Number)
STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, Florid	on rations enter Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a chec	k for the following amount	:	
S25 Filing Fee	☑ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

TO:



April 6, 2009

YEVGENIYA FREDERICKSEN 30 POPPY LANE PALM COAST, FL 32164

SUBJECT: ABUNDANCE ALLIANCE LLC

Ref. Number: L09000018360

We have received your document for ABUNDANCE ALLIANCE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

I am enclosing an Amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 009A00011477

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> Abundance</u>	2 Alli	ance	LLC			
(Name of the Limited I	iability Compar	ny as it now appe iability Company	ars on our records.)	_	
The Articles of Organization for this Limited Liab		were filed on <u>C</u>	8 am, Feb 2	4, 2009 and	assigne	ed.
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liab	ility company ń	ere:			
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Com	pany," the designation	on "LLC" or t	he abbre	viation
Enter new principal offices address, if applical	ble:		1881 I 188	ALLA	09 AF	
(Principal office address MUST BE A STREET	ADDRESS)	·		HAS A	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox)</u>			RY OF STATE	6 PH 3: 17	
B. If amending the registered agent and/or registered agent and/or the new registered office	ce address here	2:				
Name of New Registered Agent:	Yevgeni	ya Fra	dericksen	/		
New Registered Office Address:	30 Pc	oppy da	r Enter Florida stree	et address)		
	Pa/m	Coas-	del i cks en Enter Florida stree	3216 (Zip (Y Code)	·
New Registered Agent's Signature, if changing Re	gistered 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 = M	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>mgrm</u>	Sergei Kulesh (Primary Member)	45 Brookling LN Palm Coast, FT 32137	i Add Remove
MGR	Yevgeviya Fraderickse (She was a morm) Alena Zelenova	N 30 Poppy XN Palm Coast, F1 32/6/	Add Remove
MGR	Alena Zelenova	101 Palm Harber true Palm Coast, Fl 32137 Buld A, Ste 403A	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change((s) here: (Attach additional sheets, if necessary.)	O9 APR SECRET
			I PH 3: 17 ARY OF STATE SSEE FLORIDA
Dated	,	<u></u> .	
	Signature of a member of YevGeniya	r authorized representative of a member Vedevi'cks ev r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00