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T. CLINE

MAY - 5 2011

**EXAMINER** 

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:	PLAT	SDARM LLC				
BODOLECT:		nited Liability Company		-		
	·					
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.				
Please return all corre	spondence concerning this matte	er to the following:				
		V 1				
		Yelena Zubkova Name of Person				
		Firm/Company				
	501	Three Island Blvd, Apt 312		<del></del>		
		Address		₹	<u>~</u> 2	
		Hallandale FL 33009		SECR	2011 FLAY -3	المنالمة
	•	City/State and Zip Code		AHA AHA	*	
	p	latsdarm1@gmail.com (to be used for future annual report noti	Gastles)	RY SSEI		
		•	ncation)	E.F.S	-	Spaces,
For further information	n concerning this matter, please	call;		F STATE FLORIDA	PM 12: 38	A STATE OF
Y	elena Zubkova	at ( 786 )	859-6879	DA.	·@>	
Nan	ne of Person	Area Code & Daytin	ne Telephone Numb	ber	<b></b>	
Enclosed is a check for	or the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	d) Certifi	iling Fe cate of S ed Copy onal cop	tatus &	
Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations Box 6327 ahassee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Plato	darm W	<u> </u>		
(Name of the Limited Liab (A Flori	ility Company as it now appea da Limited Liability Company)	ers on our records.)	<del></del>	
The Articles of Organization for this Limited Liability Florida document number		March 8, 2010	and assigned	
This amendment is submitted to amend the following	<b>;</b> ;			
A. If amending name, enter the new name of the	limited liability company he	re:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	any," the designation "LI	.C" or the abbrevia	 itior
Enter new principal offices address, if applicable:		Ā	20	_
(Principal office address MUST BE A STREET AD	DRESS)	<u> </u>		Д
Enter new mailing address, if applicable:		AS SEC.	A Y	
(Mailing address MAY BE A POST OFFICE BOX)			37A E	<del>ブ</del> ー
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, <u>enter th</u>	e name of the	<u>new</u>
Name of New Registered Agent:		,		
New Registered Office Address:	En	nter Florida street addre	ss	_
******	- · ·	, 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>	<u>Address</u>	Type of Action
MGRM	KATASONOV, MIKH	IAIL 501 THREE ISLANDS BLVD : HALLANDALE BEACH FL 330	#312
MGR	KATASONOV, MIKH	AIL 501 THREE ISLANDS BLVD : HALLANDALE BEACH EL 330	
			Add Remove
···			Add Remove
			ALL AH Remove
··-			Remove
D. If am	ending any other information,	enter change(s) here: (Attach additional sheets, if no	
-			
-		^	100
Dated	April 20	, 2011	<del>,</del>
	Signature	of a member or authorized representative of a member	
		FEDOSOV, IGOR	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00