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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KIM MARKS CPA Account Number : I20120000072 : (305)895-5815 Phone Fax Number : (305)895-6273

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the email address for this business entity to be used for future noual report mailings. Enter only one email address please	ŀ
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SELFMOUNT ENTERPRISES, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SELFMOUNT ENTERPRISES LL	С			
(Name of the Limit	ed Liability Compa (A Florida Limited	iny as It now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited Li	iability Company	were filed on 11/	05/2010	and assigned
Florida document number L10000115711	,			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liab	ility company he	re:	
	···	**************************************	1-74-2-1	20:
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the do	signation "LLC" or the at	ibreviation L.L.C."
Enter new principal offices address, if applic	able:			<u> </u>
(Principal office address MUST BE A STREE	T ADDRESS)			
		414-14-14-14-14-14-14-14-14-14-14-14-14-		10 P 111
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3250 NE 188TH	ST UNIT 201	2: 16 2: 16
		AVENTURA FI	. 33180	ਜੀ
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our re	cords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:	VLADIMIR MALAKHOV			
New Registered Office Address:	3250 NE 188TE	H ST UNIT 201		
	· · ·	Enter Flori	da street address	· · · · · · · · · · · · · · · · · · ·
	AVENTURA		, Florida ³³	180
		City		Zip Code
New Registered Agent's Signature, if changing F	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 Changing Registered Agent, Signature of New Registered Agent

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

Fax: 13058956273

<u>Title</u>	Name	Address	Type of Action
MGR	MALAKHOV, VLADIMIR	3250 NE 188TH APT 201	□Add
		AVENTURA FL 33180	□Remove
			≘ Change
			□Add
			□Remove
			□Add
			□Remove
		<u> </u>	☐ Chunge
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			Remove
			□Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after tiling.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated ___October 7 2024 Signature of a member or authorized representative of a member Vladimir Malakov

Typed or printed name of signee