

L11000032840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2013 NOV - 8 AM 8:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOV 13 2013

D. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 25, 2013

NATALYA VOROJ
20801 BISCAYNE BLVD., STE 406
AVENTURA, FL 33180

SUBJECT: SPLINEX LLC
Ref. Number: L11000032840

We have received your document for SPLINEX LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 813A00024941

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

SplInex, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mike

Zoi

Name of Person

TIT Lab, LLC

Firm/Company

20801 Biscayne Blvd, Ste 403

Address

Aventura, FL 33180

City/State and Zip Code

NV@everfund.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Natalia Voroj

Name of Person

at (954) 496-0329

Area Code & Daytime Telephone Number

STATE OF FLORIDA
TALLAHASSEE

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Enclosed is a check for the 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)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ATTN: Neysa

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SPLInex, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 3/17/11 and assigned
Florida document number L11000032840.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited 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 ADDRESS)

20801 Biscayne Blvd
Ste 403
Aventura, FL 33180

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as Principal

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

TIT Lab, LLC

New Registered Office Address:

20801 Biscayne Blvd Ste 403
Enter Florida street address

Aventura

Florida

33180

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.

X
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> | <u>Type of Action</u> |
|--------------|--------------------------------|-----------------------------|--|
| mgrm | Net Element International Inc. | 3363 NE 163rd St. | <input type="checkbox"/> Add |
| | | Ste. 205 | <input checked="" type="checkbox"/> Remove |
| | | North Miami Beach, FL 33160 | |
| mgrm | Mike Zoi | 20801 Biscayne Blvd | <input checked="" type="checkbox"/> Add |
| | | Ste. 403 | <input type="checkbox"/> Remove |
| | | Aventura, FL 33180 | |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |

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JAIL ANASSEE FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated October 11, 2013.

X

Signature of a member or authorized representative of a member

Mike Zoi

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA