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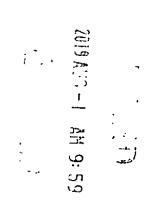
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Special Instructions to	Filing Officer:	
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R. WHITE AUG 0 6 CLJ

## **COVER LETTER**

Divisio	n of Corpo	prations		
PII SUBJECT:	RITA INV	ESTMENT AND DEVELOP	MENT FUND LLC	
SUBJECT		Name of Limi	ted Liability Company	
The enclosed Ar	ticles of A	mendment and fec(s) are sub	mitted for filing.	
Please return all	correspond	dence concerning this matter	to the following:	
		ELENA SOSNOVSKAYA		
			Name of Person	<del></del>
		ES ACCOUNTING SERV	ICES INC	
			Firm/Company	<del></del>
		2200 NE 11 STREET		
			Address	<del></del>
		HALLANDALE, FL 33009	9	
		LENOK69@HOT,AIL.COM	City/State and Zip Code	<del></del>
		E-mail address: (t	o be used for future annual report no	otification)
For further infor	mation cor	ncerning this matter, please ca	ıll:	
ELENA SOSNO	OVSKAYA		954 699-5969 at ( )	
	Name of I	Person		me Telephone Number
Enclosed is a che	eck for the	following amount:		
\$25.00 Filing	g Fec	□ \$30.00 Filing Fcc & 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:

TO:

**Registration Section** 

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2019 // 1-1 AM 9:59

## PIRITA INVESTMENT AND DEVELOPMENT FUND 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 Comp	any were filed on 03/30/2011	and assigned
Florida document number L11000038373		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		, <u> </u>
Enter new mailing address, if applicable:		· <del></del>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre.	ss
	, FI	orida
		Zip Code
New Registered Agent's Signature, if changing Registered Ag	<u>ent:</u>	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duties, a as provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	BORIS PIOTROVSKY	15901 COLLINS AVE, STE. 1506	
			Add
		SUNNY ISLES BEACH, FL 33160	
			Remove
			Change
MGRM	MARIA PIOTROVSKAYA	15901 COLLINS AVE, STE. 1506	
			Add
		SUNNY ISLES BEACH, FL 33160	
		23100	□ Remove
			Change
MGRM	IGOR REVA	15901 COLLINS AVE, STE. 1506	
MGKM			
		SUNNY ISLES BEACH, FL 33160	
		33100	□ Remove
			Character Charac
			Change
			Remove
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			Remove
			Change

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	ist be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Hock does not meet the applicable statutory filing requirements, this date will not be listed as a
ne record specifies a delayed The 90th day after the rec	ed effective date, but not an effective time, at 12:01 a.m. on the earlier of cord is filed.
Dated	. 2019
	Signature of a member of authorized representative of a member
DODIC BACTERNAY	
BORIS PASTERNAK	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00