

L110000042735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

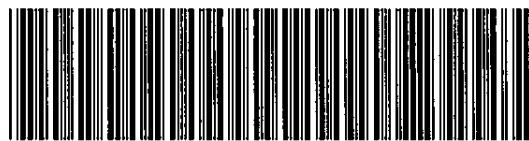
(Business Entity Name)

(Document Number)

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2013 OCT 10 AM 9:27

J. SAULSBERRY
EXAMINER

OCT 11 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Symbat Sarin Tile, 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:

Rustam Abrikhmanov

Name of Person

Symbat Sarin Tile, LLC

Firm/Company

P.O. Box 19387

Address

Panama City, FL 32417

City/State and Zip Code

tuzhik@live.com

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

For further information concerning this matter, please call:

Oleg Tuzhanskiy

Name of Person

at (850) 890-1188

Area Code & Daytime Telephone Number

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

2013 OCT 10 AM 9:27

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Symbat Sarin Tile, 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 04/11/2011 and assigned
Florida document number L 11000042735

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 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)

14806 Front Beach Rd.
lot # 40, Panama City Beach,
FL 32413-3564

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 19387
Panama City Beach, FL
32417

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:

New Registered Office Address:

14806 Front Beach Rd, lot # 40
Enter Florida street address
Panama City Beach, Florida 32413-3564
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>	<u>Type of Action</u>
MGRM	Vitaliy Ten	8700 Front Beach Rd.	<input type="checkbox"/> Add
		Panama City Beach, FL	<input checked="" type="checkbox"/> Remove
		32407	
MGRM	Davron Khamrakulov	7120 Patronis Dr.	<input checked="" type="checkbox"/> Add
		Apt. # 904 Panama	<input type="checkbox"/> Remove
		City Beach, FL 32407	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated October 7th, 2013



Signature of a member or authorized representative of a member

Rustam Abdurakhmanov

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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FILED
U.S. DISTRICT COURT
NORTH DAKOTA
GRAND FORK