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SECRETARY OF STATE
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## **COVER LETTER**

TO: Registration : Division of C					
SUBJECT:	IK School of Gymnastics, LLC				
	Name of Limited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.				
Please return all corres	pondence concerning this matter to the following:				
Dina Nerdinsky, Esq.					
Name of Person					
Nerdinsky Law Group, P.A.					
Firm/Company					
	3800 South Ocean Drive Suite 222				
	Address				
	Hollywood Beach, FL 33019				
	City/State and Zip Code				
dnerdinsky@nerdinskylaw.com E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please call:				
Dina	Nerdinsky, Esq. at ( 954 ) 237-6307  of Person Area Code & Daytime Telephone Number				
Name	of Person Area Code & Daytime Telephone Number				
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IK School of	f Gymnastics, L	LC		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appe lited Liability Company	ars on our records )	<u>s.</u> )	
The Articles of Organization for this Limited Liability Com	npany were filed on	May 25, 20	11 and assi	gned
Florida document numberL11000061357				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited</u>	l liability company ho	ere:		
The new name must be distinguishable and end with the words 'L.L.C."	"Limited Liability Com	pany," the designati	ion "LLC" or the ab	breviatio
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRES	<u> </u>	<u></u>	<u> </u>	<del></del>
			<u> </u>	<del></del>
			TAI TAI	erroner Graner
Enter new mailing address, if applicable:			- RES	
Mailing address MAY BE A POST OFFICE BOX)			T AR	<u>m</u>
			10 Z S	
			RID I	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on	our records, en	ter the name of	the nev
egistered agent and/or the new registered office address	s nere:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florid	a	
	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>	Name	Address	Type of Action
MGRM	Igor Buzyukov	18201 COLLINS AVENUE PH 5307 Sunny Isles, FL 33160	Add Remove
MGRM	Yulia Buzyukova	18201 COLLINS AVENUE PH.5307 Sunny Isles, FL 33160	Add Remove
~ <del>~~</del>			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			_
			_
Dated	October 7 20	<u>11                                   </u>	
-	Signature of a member	or authorized representative of a member	
		gradov, Managing Member	
-	Typed o	or printed name of signee	<del></del>

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Filing Fee: \$25.00