

L1100002054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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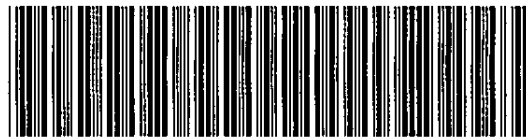
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A. LUNT

JUL 13 2011

EXAMINER

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2012 JUL 12 PM 12:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MILLCO 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:

DANILOV, ALEXANDER

Name of Person

MILLCO LLC

Firm/Company

19501 WEST COUNTRY CLUB DR # TS3

Address

AVENTURA FL 33180 US

City/State and Zip Code

best.pro@live.com

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

For further information concerning this matter, please call:

DANILOV, ALEXANDER

Name of Person

at ( 305 )

496-3673

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 JUL 12 PM 10 48

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

MILLCO 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 09/07/2011

Florida document number L11000102054

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:**

n/a

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

n/a

(Mailing address MAY BE A POST OFFICE BOX)

**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:

n/a

New Registered Office Address:

Enter Florida street address

Florida

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

FILED  
2011 JUL 12 PM 12:46  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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	DANILOV, ALEXANDER	19501 WEST COUNTRY CLUB DR. T6 AVENTURA FL 33180 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	SAVCHUK, ALEXEY	POBEDITELEY AVENUE 99-1-145 MINSK BY 22000-0 BY	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	SAVCHUK, ALEXEY	POBEDITELEY AVENUE 99-1-145 MINSK BY 22000-0 BY	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

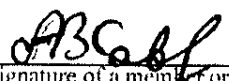
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated JULY, 05, 2012

2012 JUL 12 PM 1:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
SAVCHUK, ALEXEY  
\_\_\_\_\_  
Typed or printed name of signee