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SECRETARY OF STATE

J. SAULSBERRY EXAMINER SEP 16 2011

COVER LETTER

TO:	Registration S Division of Co	Section orporations			
SUBJE	ECT:	WC	ORKAS LLC		
001001		Name of Lin	ited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The en	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please	return all corresp	condence concerning this matter	er to the following:		
ELENA SOSNOVSKAYA					
Name of Person					
ES ACCOUNTING SERVICES INC					
			Firm/Company		<u>-</u> 4 ~ 2:
2200 NE 11 STREET					SEC
			Address		ARE SEP
	HALLANDALE, FL 33009				2011 SEP 15 AM 8: 1 SECRETARY OF STATI
	City/State and Zip Code				AM :
		LEN E-mail address:	NOK69@HOTMAIL.COM (to be used for future annual report notifi	cation)	8: STATE
For fur	ther information	concerning this matter, please	·	,	
		SOSNOVSKAYA	at (699-5969	
	Name	of Person	Area Code & Daytime	e Telephone Number	r
Enclose	ed is a check for	the following amount:			
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)) Certified	ite of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section ion of Corporations Box 6327	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ORKAS LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability C	ompany were filed on	09/09/2011	and assigned
Florida document number L11000103251	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company he	<u>re</u> :	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Comp	any," the designation "l	LC" or the abbreviation
Enter new principal offices address, if applicable:		:	2011 SE
(Principal office address MUST BE A STREET ADDR	ESS)		
			SSE J
Enter new mailing address, if applicable:			ERS R
(Mailing address MAY BE A POST OFFICE BOX)			
			>
B. If amending the registered agent and/or registoregistered agent and/or the new registered office addr	ered office address on e	our records, <u>enter t</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	City	, Florida	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	VIKTORIYA TATARNIKOV	18555 COLLINS AVE STE 1134 SUNNY ISLES, FL 33160	Add Remove
MGR	VICTORIA TATARNIKOVA	18555 COLLINS AVE STE 1134 SUNNY ISLES, FL 33160	☑ Add Remove
			Add Remove
			Add Remove
			Add Remove
	 		Add Remove
D. If amend	ing any other information, enter change(s	s) here: (Attach additional sheets, if necessary)	ZIII SEP 15 AM
		ORIO A	
Dated	SEPTEMBER 12 , 201		
	Signature of a member of	Ria Jaraeni Kova authorized representative of a member	
	_	IA TATARNIKOVA	
		printed name of signee	

Page 2 of 2

Filing Fee: \$25.00