L12000037320

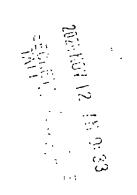
(Re	questor's Name)				
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(Cit	y/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
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Certified Copies	Certificates of	Status			
Special Instructions to Filing Officer:					
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Office Use Only



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October 30, 2024

EVGENY MERZLYAKOV 1850 S OCEAN DR APT 1110 HALLANDALE, FL 33009

SUBJECT: YASMINA SURFSIDE, LLC

Ref. Number: L12000037320

We have received your document for YASMINA SURFSIDE, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

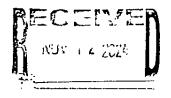
The form you submitted is for a CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN Regulatory Specialist II

Letter Number: 924A00023889



COVER LETTER

The enclosed Certificate of Merger and fec(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
EVGENY Merzyakov Contact Person	
Yasmina Surfisiole LLC	
Firm/Company	
1850 S Ocean DR #1110 Address	
Hallandale, FL, 33009 City, State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
FUGERY MERZINALOV at 954 505-0462 Name of Contact Person Area Code Daytime Telephone Number	
☐ Certified copy (optional) \$30.00	型。型

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Amendment Section

P. O. Box 6327

CR2E080 (2/20)

STREET ADDRESS:

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Amendment Section

Clifton Building

TO:

Amendment Section Division of Corporations

SUBJECT: Yasmina Surfside LLC
Name of Surviving Party

Articles of Merger For Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

SECOND: The exact name, form/entity type, and jurisdiction for each merging party are as follows:

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name

Suppose Jurisdiction

Form/Entity Type

Yasming Supfishe Florida

LLC

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

Pugenty Merzhakov

Merzhakov

Merzhakov

Suppose the merger will have interest holder liability under s.605.1023(1)(b).

FOUR	TH: Please check one of the bo	exes that apply t	o surviving en	ity: (if applicable)					
∀	This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.								
	This entity is created by the merger and is a domestic filing entity, the public organic record is attached.								
		nerger and is a domestic limited liability limited partnership or a domestic limited ment of qualification is attached.							
	This entity is a foreign entity that does not have a certificate of authority to transact business in this state. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48. Florida Statutes is:								
						-			
ss.605.	1: This entity agrees to pay any n 1006 and 605.1061-605.1072. F. 1: If other than the date of filing	S.							
days at	fter the date this document is filed	d by the Florida	Department o	f State:					
as the	If the date inserted in this block document's effective date on the NTH: Signature(s) for Each Par	Department of	he applicable s State's records						
	of Entity/Organization:		nature(s):		Typed or Printe Name of Indivi				
	smina Suptsicle	ello		AU Ev	Lany Me	Reyaka			
	ushine Drive	_	- Cil	Eve	ery M.	erzlyaka			
<u> </u>			<u> </u>	<u> </u>	——————————————————————————————————————				
					0.50				
Corpo	rations:			resident or Officer nature of incorporator.)	07/12				
Florida Non-F	rida Limited Partnerships: I-Florida Limited Partnerships: Signature of a general partner or authorized person Signatures of all general partners Signature of a general partner Signature of a general partner Signature of an authorized person								
Fees:	For each Limited Liability Con For each Limited Partnership: For each Other Business Entity		\$25.00 \$52.50 \$25.00	For each Corporation: For each General Partner Certified Copy (option)		\$35.00 \$25.00 \$30.00			