(Requestor's Name)	54434
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(Address) (City/State/Zip/Phone #)	01/22/19-+01029U21 →+28.00
Business Entity Name)	
(Document Number)	
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COVER LETTER *

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TO: Registration Section Division of Corporations

DEERK, LLC SUBJECT:

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:

ANDREY STRIGIN

Name of Person

Firm/Company

7750 OKEECHOBEE BOULEVARD, Suite #4-571

Address

WEST PAILM BEACH, FL 33411

City/State and Zip Code

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

For further information concerning this matter, please call:

ANDREY STRIGIN

646 502 7578 _____at (_____) _____

Name of Person

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2019 JAN 22 AM 8:21

PALLARASSEE, FL

 DEERK, LLC
 (Name of the Limited Liability Company acit now appears on our records,) (A Flonda Limited Liability Company)

 The Articles of Organization for this Limited Liability Company were filed on 04/23/2012 _________ and assigned

 Florida document number L12000054434 __________

 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 contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC"

 Enter new principal offices address, if applicable:

 (Principal office address, if applicable:

 (Mailing address, if applicable:

 (Mailing address, if applicable:

 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:

 Name of New Registered Agent:

	Enter Florida street address	
		. Florida
_	City	Zip Code

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 605, 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

• •

MGR = Manager AMBR = Authorized Member

•

. . .

<u>Title</u>	Name	Address	Type of Action
MGR	JOANNE GALY	7750 OKEECHOBEE BOULEVARD	🗆 Add
		Suite #4-571	—
		WEST PALM BEACH, FL 33411	
	5 STISTED FOR TOTAL		Change
MGR	ANDREY STRIGIN	7750 OKEECHOBEE BOULEVARD	📕 Add
		Suite #4-571	_□ Remove
		WEST PALM BEACH, FL 33411	
			Change
			D Add
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			Change

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

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9 JAN 2019 E. Effective date, if other than the date of filing: _______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	9 Jan Dol 9 avent
-	Signatule of a member or authorized representative of a member ANDREY STRIGIN

Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00