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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

.. COVER LETTER

SUBJEC	CT:	KAI	RLIN LLC	
SOBSEC			ed Liability Company	
The encl	osed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please re	eturn all corresponde	ence concerning this matter	to the following:	
			NIKOLAY SHULGIN	
			Name of Person	•
			KARLIN LLC	
			Firm/Company	
	P O BOX 3457			
			Address	
		S	EMINOLE FL 33775	
			City/State and Zip Code	
		BE	ST.PRO@LIVE.COM o be used for future annual report	
Con final	i		•	. notification)
rortum	er information cond	cerning this matter, please co	aii:	
		Y SHULGIN	at (_727)	686-1481
	Name of Pe	erson	Area Code & D	aytime Telephone Number
Enclosed	d is a check for the t	ollowing amount:		
\$25.0	00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registration of P.O. Box	of Corporations	Registration S Division of C Clifton Build	Corporations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	KARLIN LLC			•
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appea	rs on our records.)		
(// 1 1011da	Emmed Endomity Company)			
The Articles of Organization for this Limited Liability C	Company were filed on	04/24/2012	and assig	gned
Florida document number L12000054928	.			
				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	nited liability company he	re:		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Comp	any," the designation	'LLC" or the at	obreviation
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	RESS)			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	•		-	
muning university BB/11 OST OTT TOE BON		•		
	· · · · · · · · · · · · · · · · · · ·			
B. If amending the registered agent and/or regis	stered office address on	our records, enter	the name of	the new
registered agent and/or the new registered office add	dress here:			
Name of New Registered Agent:			<u> </u>	
New Registered Office Address:		•	空	11
	E	nter Florida street ad	dress =	Same and
		, Florida	SEE.	m
	City	, i to i i da	Zip Code	
New Registered Agent's Signature, if changing Registere	ed Agent:			
			DL -	

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
MGRM	MONEY TREE USA LLC	7985 113TH STREET, UNIT 212 SEMINOLE FL 33772 US	Add Remove
<u>MGRM</u>	NIKOLAY SHULGIN	7903 SEMINOLE BLVD, APT. 2408 SEMINOLE FL 33772 US	Add Remove
MGR	'OKHOTNIK' LLC	40 LENIN ST OREKHOVO-ZUEVO MO 14260-0 RU	Add Remove
MGRM	NIKOLAY INKIN	7162 CONCH BLVD SEMINOLE FL 33777 US	✓ Add — Remove
MGR	NIKOLAY SHULGIN	7903 SEMINOLE BLVD, APT. 2408 SEMINOLE FL 33772 US	Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	Add Remove
 Dated	Signature of a member	012	
	Гуре	d of printed figure of signed	

Page 2 of 2

Filing Fee: \$25.00