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DEC 6 2012

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: IRE RESIDENTIAL, 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:

RUSLAN KRIVORUCHKO  
Name of Person

DOLCE Living  
Firm/Company

1920 E. HALLANDALE BCH. BLVD - SUITE 505  
Address

HALLANDALE BEACH, FL. 33009  
City/State and Zip Code

IKRIVOR@DOLCELIVING.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAURA GLIKAS at (954) 455-0336  
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

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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>
SOLE MEMBER	IGOR KRIVORUCHKO	1920 E. HALLANDALE BCH. BLVD.	<input type="checkbox"/> Add
		SUITE 505	<input checked="" type="checkbox"/> Remove
		HALLANDALE FL 33009	
SOLE MEMBER	TATYANA KRIVORUCHKO	1920 E. HALLANDALE BCH. BLVD	<input checked="" type="checkbox"/> Add
		SUITE 505	<input type="checkbox"/> Remove
		HALLANDALE BCH. FL 33009	
			<input 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

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

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Dated 12/03, 2012.

Igor Krivoruchko

Signature of a member or authorized representative of a member

IGOR KRIVORUCHKO

Typed or printed name of signee

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Filing Fee: \$25.00

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