113000011284

(Requestor's Name)
(Address)
(Address)
(,
(6) 10) 17: (8)
(City/State/Zip/Phone #)
(Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
;
L





400318995904

ũ3/27/18--010ữ3--ũũ4 *+30.08

AT DOT IS A TH



October 3, 2018

EDWARD ORLOV 15701 NW 15TH AVE MIAMI, FL 33169

SUBJECT: DEVOLRO GROUP LLC

Ref. Number: L13000011284

We have received your document for DEVOLRO GROUP LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type or print name of signee on page 3 of 3.

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) 245-6051.

Letter Number: 518A00020579

Dionne M Scott Regulatory Specialist II

L

www.sunbiz.org

COVER LETTER

Division of Corporations		
SUBJECT: Devolvo Group LLC Name of Limited Liability Company		
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:		
Educard Orlov		· .
Educard Orlov Name of Person	771 m	
Devolvo Group LLC Firm/Company	<u> </u>	
Firm/Company	 	j
15701 NW 15th Ave		
Address		
Hiami, FL 33169 City/State and Zip Code		
E-mail address (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Educad Orlov at (786) 532-0050 Name of Person Area Code Daytime Telephone Number		
Name of Person		
Enclosed is a check for the following amount:		
(additional copy is enclosed) Certified C	of Status &	

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

(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.) ity Company)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L 130000 12 284</u> .	e filed on $OI/23/2013$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
1. If amending name, enter the new name of the minted namely	company acre.
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	-d
-	ू इ
	J
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
_	
B. If amending the registered agent and/or registered office	address on our records, enter the name of the
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zip Code

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGL	Vasilii Bobkou	15701 NW 15th Ave, Miami, FL 33169	b Add
			□ Remove
,			Change
			Remove
			☐ Change
			Add 7
			Change
			Remove
			Change
			D Add
			Remove
			Change
			D Add
			Remove
			Change

				· · · · · · · · · · · · · · · · · · ·	<u> </u>	_
 					***	_
						_
			_			_
				•		-
-10			<u></u>			_
						_
						_
					<u>, –, </u>	
					57	
					>	, ; ; ;
					-,,j -=:	~
						_
			 			-
						_
						_
reffective date te: If the date	is listed, the date must be	e specific and cannot be k does not meet the a	e prior to date of filing c applicable statutory f	(option more than 90 days after than grequirements, this	r filing.) Pursuant to 6	605.02 isted
record spe The 90th da	cifies a delayed e ay after the recor	effective date, bu d is filed.	it not an effectiv	e time, at 12:01	a.m. on the ear	lier
	, 24.2018	?·	·		,	
ted <u>09</u>		gnature of a member of		ful	···-	

Page 3 of 3

Filing Fee: \$25.00