Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230002579743)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I20170000056

Phone

: (954)842-2931

Fax Number

: (954)842-2936

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Emall	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YANA 601, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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S. ROBERTS Help

JUL 2 5 2023

COVER LETTER

Div	ision of Cor	porations			
SUBJECT:	YANA 601	LLC			
SUBJECT:		Name of Lim	ited Liability Company		-
The enclosed	l Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	ndence concerning this matter	to the following:		
		ALEX SORSHER			
			Name of Person	· · · · · · · · · · · · · · · · · · ·	_
		YANA 601, LLC			
			Firm/Company		_
		9703 Collins Avenue UNI	T 601		
			Address		
		BAL HARBOUR, FL 331	54		
			City/State and Zip Code		
		A9548422931@GMAIL.CO			
			to be used for future annual	report notification)	-
For further in	iformation co	oncerning this matter, please ca	all:		
ALEX SOR	SHER		954 84. at ()	2-2931	
	Name of	Person	Area Code	Daytime Telephone Num	ber
Enclosed is a	check for th	e following amount:			
■ \$ 25.00 F	iling Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is end	Certifi losed) Certifi	Filing Fee, icate of Status & ed Copy mal copy is enclosed)
Reg Div	ling Address gistration S rision of Co J. Box 632	ection orporations	Divisio	Idress: ation Section n of Corporations ntre of Tallahassee	

Tallahassee, FL 32314

Registration Section

TO:

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YANA 601, LLC	
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited Liability Company were filed on	05/24/2013 and assigned
lorida document number L13000076266	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	25
	(a)
Constant and the address of annihilation	
Enter new mailing address, if applicable:	- 7
Mailing address MAY BE A POST OFFICE BOX)	
	<u>ب</u> ب
	•
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address: Enter F	lorula street address
	, Florida
City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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, 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
MGR	SORSHER, ALEKSANDR	900 N FEDERAL HWY STE 306	
		HALLANDLAE, FL 33009	□ Remove
			□ Change
MGR	Tzinker, Daniel	9111 E BAY HARBOUR DRIVE, #6B	
		BAY HARBOUR ISLAND, FL 33154	■Remove
			ुल्ह्युः - DChange
 			
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
			Change

	iding any other information, en			
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Fífectiv	a data if other than the date of	f filing:	(antiagal)	
Note: 1:	ctive date is listed, the date must be speci f the date inserted in this block does nt's effective date on the Departmen	s not meet the applicable statut	(optional) iling or more than 90 days after filing.) Potory filing requirements, this date will	irsuant to 605.0207 (Il not be listed as t
e record rd is file		out not an effective time, at 12:	01 a.m. on the earlier of: (b) The 9	Oth day after the
Dated _)7/24	2023		
		A		
		e of a member or authorized repre		

Filing Fee: \$25.00

Typed or printed name of signee