

LA3 000130490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Amer

Office Use Only



400249822134

09/27/13--01004--002 **25.00

FILED

13 SEP 27 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L. Bush SEP 30 2013

pusa

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEAGULL RENTALS 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:

Artem Nechera
Name of Person

Seagull Rentals LLC
Firm/Company

611 Espanola way, #8
Address

Miami Beach FL 33139
City/State and Zip Code

necherartem@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Artem Nechera at (786)-238-9978
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**

SEAGULL RENTALS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/14/2013 and assigned Florida document number L 13000130490

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
13 SEP 27 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Name of New Registered Agent: NECHESA ARTEM

New Registered Office Address: 611 Espanola way #8
Enter Florida street address

Miami Beach, Florida 33139
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 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, 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>
MGRM	Iaroslav Khodakivskyi	5601 Colling ave, #1118	<input checked="" type="checkbox"/> Add
		Miami Beach, FL 33140	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 SEP 27 PM 4:14
FILED
Remove

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

When we were filling the LLC form for
some reason it were says (Nechesa Artem, (SR))
and we could not open an account at the
bank. They ask us to change it to the same
name without a suffix (SR). And we need to add EIN #
Dated 09/24/2013 EIN Assigned: 46-3636596


Signature of a member or authorized representative of a member

ARTEM NECHESA

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
13 SEP 27 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA