## L14000 173 873

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Amend

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## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBIR	TANUKI, I	ДС		
SUBJE	CI:	Name of Lim	ited Liability Company	**************************************
The enc	closed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Klara Fishman-Sitbon, Esc	<b>}</b> -	
		-	Name of Person	
		Law Offices of Fishman-S	itbon, P.A.	
			Firm/Company	<del></del>
		80 SW 8th Street, FL 20		
			Address	
		Miami Beach, FL 33130		
			City/State and Zip Code	<del></del>
		kfishman@fsplegal.com		<del>,,,</del>
- c /-			to be used for future annual report noti	neation)
ror turi	ner information e	oncerning this matter, please ca	AH:	
Klara F	ishman-Sitbon		305 423-7077 at ()	
	Klara Fishman-Sitbon 305 423-7077 at ()  Name of Person Area Code Daytime Telephone Number			
Enclose	d is a check for th	ne 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

Tanuki, LLC	
( <u>Name of the Limited Liability</u> (A Florida I	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on 11/07/14 and assigned
Florida document number L14000173873	_·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and contain the words "Limite	ted 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 ADDRE	ESS)
	ESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office addresses.	ered office address on our records, enter the name of the no
registered agent and/or the new registered office address	ess nere.
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida 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	Andrey Isaev	1080 Alton Road	
		Miami Beach, Fl. 33139	■ Remove
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			Add
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			□ Change
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(If an effecti <u>Note:</u> If	ive date is listed, the	e date must be spe in this block do	ecific and cannot be es not meet the a	applicable statutoi	ng or more than 9	(optional) 0 days after (iling.) P ments, this date wi	ursuant to 605.0207 Il not be listed as
If the recor (b) The 90	d specifies a o Oth day after	delayed effect the record is	ctive date, bu filed.	ut not an effec	tive time, at	12:01 a.m. or	n the earlier of
Dated	arch 14		2019				
			_/				
		Signati	ure of a member o	r authorized represe	entative of a mem	ber	

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Filing Fee: \$25.00