

L14000195823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

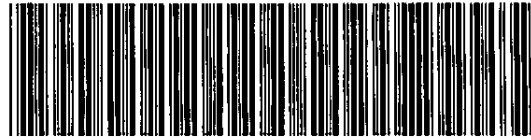
Certificates of Status _____

Special Instructions to Filing Officer:

corrected Per conversation
with Vitaliy SERGEYEVICH
1/13/2017 KS

RA NOT Reg

Office Use Only



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01/03/17--01028--005 **25.00

2017 JAN 9 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

K. SALY

JAN 13 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2017

HOUSE INC.
VITALIY SERGEYEVICH
8320 SANDS POINT BLVD, STE. M208
TAMARAC, FL 33321

SUBJECT: HOUSE MANAGEMENT LLC
Ref. Number: L14000195823

We have received your document for HOUSE MANAGEMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 817A00000668

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HOUSE MANAGEMENT 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:

VITALIY SERGEYEVICH

Name of Person

HOUSE INC.

Firm/Company

8320 SANDS POINT BLVD SUITE M208

Address

TAMARAC, FL 33321

City/State and Zip Code

BUYINGFORCASH@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VITALIY SERGEYEVICH

954 614-0878
at ()

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**

HOUSE MANAGEMENT LLC

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

FILED
2017 JAN 9 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/29/2014 and assigned
Florida document number LI4000195823

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 contain 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)

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:

HOUSE INC

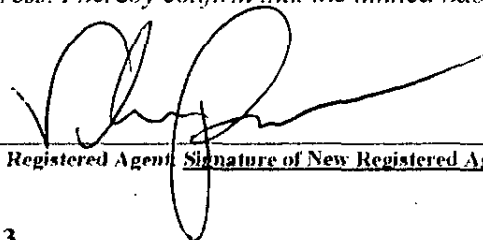
New Registered Office Address:

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	PERSHIN, VITALIY	8320 SANDS POINT BLVD	<input type="checkbox"/> Add
		SUTTE M208 TAMARAC, FL. 33 321	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HOUSE INC	8320 SANDS POINT BLVD	<input checked="" type="checkbox"/> Add
		SUTTE M208 TAMARAC, FL. 33 321	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

FILED
2015 JAN 9 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 JAN 9 PM 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2017 JAN 9 PM 4:01
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

1-6 - 2017

Signature of a member or authorized representative of a member

VITALIY PERSHIN

Typed or printed name of signee