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K.SALY EXAMINER JUN - 2 2015

COVER LETTER

Div	ision of Corp	orations		
SUBJECT:	MILANO DA	SOLE LLC		
00202011		Name of Limi	ted Liability Company	
The enclosed	l Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspond	dence concerning this matter	to the following:	
		JAN SAVINKO		
			Name of Person	
			Firm/Company	
		13819-F WALSINGHAM	RD	
			Address	
		LARGO, FL 33774		
			City/State and Zip Code	
		INFO@MILANODASOLE		
		E-mail address: (1	o be used for future annual report notifica	tion)
For further in	nformation cor	ncerning this matter, please ca	dl:	
JAN SAVIN	IK O		727 240-0228 at ()	
	Name of I	Person	Area Code Daytime To	elephone Number
Enclosed is a	check for the	following amount:		
\$25.00 F	iling 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:

TO:

Registration Section

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

2015 MAY 29 AM II: 13

MILANO DA SOLE 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 Life Florida document number L15000018120	ability Company	were filed on 01/30	2015 and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	oility company here	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	13819-F WALSING	GHAM RD
(Principal office address MUST BE A STREE		LARGO FL 33774	
Enter new mailing address, if applicable:		13819-F WALSING	GHAM RD
(Mailing address MAY BE A POST OFFICE	BOX)	LARGO FL 33774	
B. If amending the registered agent and/ registered agent and/or the new registered of			or records, enter the name of the new
Name of New Registered Agent:	JAN SAVINKO		•
New Registered Office Address:	13819-F WALS	SINGHAM RD	
		Enter Florida	street address
	LARGO		, Florida <u>33774</u>
		City	Zip Code
New Registered Agent's Signature, if changing I	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	JAN SAVINKO	13300 WALSINGHAM RD #42	■ Add
		LARGO FL 33774	☐ Remove
			Change
AMBR	IRINA PILIPCIUC	13300 WALSINGHAM RD #42	■ Add
		LARGO FL 33774	☐ Remove
		***	Change
			Add
			Remove
			Change TA A Change
			Remove Change
			□ Add
			□ Remove
			Change
			□ Remove
			Change

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	JAN SAVINKO	nember of authorized representative of a member	

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Filing Fee: \$25.00