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COVER LETTER

Registration Section

Division of Corporations

TO:

Golden Cal	fLLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Eric Amkhinich			
		Name of Person		
	Golden Calf LLC			
		Firm/Company		
	2932 Blakely Dr.			
		Address		
	Orlando, FL 32835			
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
	goldencalf15@gmail.com			
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
Eric Amkhinich		407 8833281 at ()		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	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 S Division of C	Section orporations	Street Address: Registration Se Division of Co	rporations	
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F1 50

Golden Calf 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 $\frac{04/15/2015}{...}$ and assigned Florida document number <u>L15000066478</u> 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 "L1.C" or the abbreviation "L1.C." 2932 Blakely Dr. Enter new principal offices address, if applicable: Orlando, FL 32835 (Principal office address MUST BE A STREET ADDRESS) 2932 Blakely Dr. Enter new mailing address, if applicable: Orlando, FL 32835 (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: New Registered Office Address: Enter Florida street address

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	Olena Gryshyna	2932 Blakely Dr., Orlando, FL 32835	\ Add
			□Remove
			□Change
MGR	Georgii Starostenko		□Add
		8421 S. Orange Blossom Trail #128, Orlando, FL	3280 ■Remove
			□Change
			□Add
			□ Remove
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n effective date is listed, the date must te: If the date inserted in this blo cument's effective date on the De	ck does not meet the applica		
ecord specifies a delayed effective is filed.	date, but not an effective tir	nc, at 12:01 a.m. on the earlie	r of: (b) The 90th day after the
November 01	2021		
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Typed or printed name of signee