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TO: Registration Section

Div	ision of Corp	porations		
our mon		DINVEST, LLC		
SUBJECT:	-	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub-		
		IGOR RASCHKOVSKY		
			Name of Person	
		1602 AUTOINVEST, LLC	•	
			Firm/Company	
		409 W. HALLANDALE B	BEACH BLVD., SUITE 208	
			Address	
		HALLANDALE, FL 3300	9	
		·	City/State and Zip Code	
		igor.raschkovsky@grafenoi E-mail address: (to be used for future annual report notific	ation)
For further in	iformation co	oncerning this matter, please ca	all:	
Ana Victoria	a Campos		202 961.2907 at ()	
	Name of	Person	Area Code Daytime 1	Felephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.C	iling Address gistration S vision of Co D. Box 632 lahassee, F	Section orporations 7	Street Address: Registration Section Division of Corporate Centre of Tale 2415 N. Monroe Tallahassee, FL 3	orations Hahassee Street, Suite 810

1602 AUTOINVEST, LLC

Docusign Envelope ID: 205DBBB7-B203-4ACF-879B-D295FC8F1232 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF FILED

			s on our meconds.) -8	
The Articles of Organization for this Limited I Florida document number	Liability Compan	ly were filed on 08/	05/2015	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited lia	bility company he	re:	
N/A				
The new name must be distinguishable and contain the	words "Limited Liab	bility Company," the de	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A		
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE BOX)				-
B. If amending the registered agent and/or agent and/or the new registered office addresses		address on our re	ecords, <u>enter the na</u>	ime of the new registered
Name of New Registered Agent:	N/A			
New Registered Office Address:				
rion registered errice radicess.		Enter Flori	ida street address	
			, Florida _	
		City	·	Zip Code
New Registered Agent's Signature, if changing	Registered Agen	<u>t:</u>		
I hereby accept the appointment as register provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complet istered agent as registered offic	te performance of t s provided for in C	my duties, and I an Chapter 605, F.S. O	n familiar with and Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

necoding Envelope to. 200000007-0200-4ACF-0790-0290F00F1232
If amending Authorized rerson(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	GRAFENO INTERNATIONAL	IFZA BUSINESS PARK	= Adđ
	INVESTMENTS - FZCO	DUBAI SILICON OASIS	□Remove
		DUBAI- UNITED ARAB EMIRATES	□Change
MGR	IGOR RASCHKOVSKY	409 W. HALLANDALE BEACH BLVD	□Add
		SUITE 208	■Remove
		HALLANDALE, FL 33009	□Change
			□Add
			□Remove
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f an eff	ive date, if other than the date of filing:
Note:	of order of the partition of order of records.
Note:	
Note: docum	d 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 led.
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