1500/64582

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	



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COVER LETTER

TO:	Registration Se Division of Cor		•	
enio n	BIS Infinity			
SUBJI	ECT:		ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Svitlana Tsvey		
		.	Name of Person	
		BIS Infinity LLC		
			Firm/Company	
		5959 NW 74 street		
			Address	
		Parkland, FL 33067		
			City/State and Zip Code	
		bisinfinity@gmail.com		
		E-mail address: (to be used for future annual report notit	ication)
For fur	ther information co	oncerning this matter, please ca	all:	
Svitlar	na Tsvey		954 415-0041 at () Area Code Daytime	
	Name o	f Person	Area Code Daytimo	: Telephone Number
Enclos	ed is a check for th	ne following amount:		
≅ \$2.	5.00 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 4, 2017

SVITLANA TSVEY 5959 NW 74 STREET PARKLAND, FL 33067

SUBJECT: BIS INFINITY, LLC Ref. Number: L15000164582

We have received your document for BIS INFINITY, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 417A00020109

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIS Infinity LLC	
(Name of the Limited Liability Company as it now appears on our reco (A Florida Limited Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited Liability Company were filed on 09/28/2015	and assigned
Fforida document number L15000164582	•
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 "Li	.C" or the abbreviation "L.JC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	, p
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	is Dir
B. If amending the registered agent and/or registered office address on our record	do annual con
registered agent and/or the new registered office address here:	us, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	ess
, F	lorida

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
AMBR	DEMINA, TATIANA	408 NE 23rd AVE	
		POMPANO BEACH, FL 33062	■ Remove
			□ Change
		-	
			Remove
			Change
			
			Remove
		-	🗀 Change
			Remove
			C Chan
			Add
			Remove :
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			□ Remove
			□ Change

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Filing Fee: \$25.00