

8/27/2019

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

H1600020928

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000258500 3)))



H190002585003ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BEST PRO SERVICES INC
Account Number : 120140000068
Phone : (727)504-1870
Fax Number : (727)683-9500

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RIDES AND ATTRACTIONS FACTORY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T GLASS

AUG 28 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RIDES AND ATTRACTIONS FACTORY, 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:

ABRAMOV, MIKHAIL

Name of Person

RIDES AND ATTRACTIONS FACTORY, LLC

Firm/Company

133 NW 24 Street

Address

Wilton Manors, FL 33311

City/State and Zip Code

4help123@gmail.com

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

For further information concerning this matter, please call

ABRAMOV, MIKHAIL

786

635-6073

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
Chilton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2019 AUG 27 PM 4:17

APPROVAL
FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIDES AND ATTRACTIONS FACTORY, 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 01/29/2010 and assigned Florida document number L16000020928.

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 "LLC."

Enter new principal offices address, if applicable:

121 NE 34th street, unit 3015

(Principal office address MUST BE A STREET ADDRESS)

Miami, Florida, 33137

Enter new mailing address, if applicable:

121 NE 34th street, unit 3015

(Mailing address MAY BE A POST OFFICE BOX)

Miami, Florida, 33137

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

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>
AMBR	Sapogovskii, Aleksandr	2880 NE 26TH PL.	<input type="checkbox"/> Add
		Fort Lauderdale	<input checked="" type="checkbox"/> Remove
		FL 33306	<input type="checkbox"/> Change
AMBR	Lucchese, Asia	133 NW 24 Street	<input type="checkbox"/> Add
		Wilton Manors, FL 33311	<input checked="" type="checkbox"/> Remove
		FL 33311	<input type="checkbox"/> Change
AMBR	ABRAMOV, MIKHAIL	121 NE 34th street, unit 3015	<input type="checkbox"/> Add
		Miami	<input type="checkbox"/> Remove
		FL, 33137	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[The page contains faint horizontal lines, suggesting it was part of a lined document.]

2019 Aug 27 PM 4:17

5

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated August 27 2019

ABRAMOV, MIKHAIL.

Filing Fee: \$25.00