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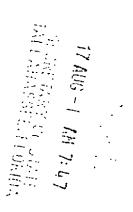
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COVER LETTER

S & V Group, LLC	
SUBJECT: 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:	
Denis Fishman, Esq	
Name of Person	
Denis Fishman P.A.	
Firm/Company	
1920 E. Hallandale Beach Blvd., Ste. Ph-8	
Address	
Hallandale Beach, FL 33009	
City/State and Zip Code	
df@denisfishman.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Denis Fishman 305 9319355 at ()	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status} \Bigcup \text{\$55.00 Filing Fee & Certificate of Status} \Bigcup \text{\$Certified Copy (additional copy is enclosed)} \Bigcup \$Certified Copy (additional copy of the copy of the copy (additional copy of the copy (additional copy of the	of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S & V Group, LLC				
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)		
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
The Articles of Organization for this Limited I	Liability Company were filed on $\frac{10}{2}$	0/06/2016 and assigned		
Florida document number L16000185875	,			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liability company h	<u>iere</u> :		
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "L.L.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if appli	cable:			
				
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>			
				
		三		
Enter new mailing address, if applicable:		598 1		
(Mailing address MAY BE A POST OFFICE	(BOX)	To 🕳		
B. If amending the registered agent and	War registered office address o	n our records enter the name of the na		
registered agent and/or the new registered (n our records, enter the name of the ne		
Name of New Designation of Assess				
Name of New Registered Agent:				
New Registered Office Address:	1920 E Hallandale Beach Blvd, Ste. PH-8			
	Enter Flo	orida street address		
	Hallandale Beach	Florida 33009		
	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 Title **Type of Action** Name **Address** Sergii Ilchenko 3493 NW 167th St, Miami FL 3305 **AMBR ■** Add ☐ Remove ☐ Change **AMBR** Gulnara Ilchenko M. Kolbe St. 4-6, Radomsko, 97500 □ Add Poland **■** Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove □ Change □ Add □ Remove

☐ Change

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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this blocument's effective date on the Do	be specific and cannot bock does not meet the	e prior to date of filing or applicable statutory fili	(optio more than 90 days after ng requirements, this	nal) filing.) Pursuant to 605.0207 date will not be listed as
e record specifies a delayed The 90th day after the rec		ut not an effective	time, at 12:01 a	.m. on the earlier of
Dated July 27.	. 2017			
Heben.	10 OUX	nece		
	Signature of a member of	or authorized representativ	re of a member	
Ilchenko, Gulnara				

Page 3 of 3

Filing Fee: \$25.00