

L17000000532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

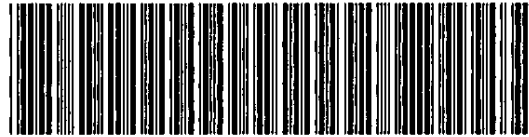
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 08 2017

Y SULKER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ray Enterprise Group, 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:

Rachid Zraoui

Name of Person

Ray Enterprise Group, LLC

Firm/Company

590 SW Fairview Ave

Address

Port Saint Lucie, FL 34983

City/State and Zip Code

RZraoui@gmail.com

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

For further information concerning this matter, please call:

Rachid Zraoui

Name of Person

at (561) 818-7351

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Bay Enterprise Group, LLC

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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	Anatoliy Zikanov	13868 Whispering Lakes Lane	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33418	<input type="checkbox"/> Remove
		change title from "CHM" to "AMBR"	<input type="checkbox"/> Change
MGR	Rachid Zraouli	590 SW Fairview Ave	<input checked="" type="checkbox"/> Add
		Port Saint Lucie, FL 34983	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Under Authorized Persons Detail, change  
Anatoliy's title from "CHM" to "MBR"

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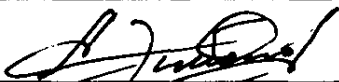
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record 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 record is filed.

Dated June 1, 2017



Signature of a member or authorized representative of a member

Anatoliy Zikanov

Typed or printed name of signee