117000011440

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 2, 2017

OZGAR SUYEL 6657 WINDSOR DR PARKLAND, FL 33067

SUBJECT: TURENG DICTIONARY LLC

Ref. Number: L17000011440

We have received your document for TURENG DICTIONARY LLC and your check(s) totaling \$60.00. 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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 417A00022208

2017 DEC 11 RAIN HO



FLORIDA DEPARTMENT OF STATE Division of Corporations

Octöber 4, 2017

OZGAR SUYEL 6657 WINDSOR DR PARKLAND, FL 33067

SUBJECT: ETERNITY CRYSTAL, LLC.

Ref. Number: L17000011460

L17000011440

Tureng Dictionary, L.L.C

We have received your document for **EVERNITY WAYNETAL**, LLC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$7.50.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 817A00020044

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COVER LETTER

9: Registration Section Division of Corporations
BJECT: Tureng Dictionary, LLC
Name of Limited Liability Company
ne enclosed Articles of Amendment and fee(s) are submitted for filing.
ease return all correspondence concerning this matter to the following:
Ozgur Suyel Name of Person
Name of Person
Tureng Dictionary, LLC
6657 Windsor Drive
Parkland FL 33067 City/State and Zip Code
OSUYE & turena. com E-mail address: (to be used for flittle annual report notification)
or further information concerning this matter, please call:
Mariesa Ciegel at (954) 871 3256 Area Code Daytime Telephone Number
Came of Person Area Code Daytime Telephone Number
nclosed is a check for the following amount:
\$25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section Division of Corporations P.Q. Box 6327 Tallahassee, F1, 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

rureng	Dictionary, LLC	
(Name of the Limited Li	ability Company as it how appears on our orda Limited Liability Company)	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and thinked thinking company	PT.
The Articles of Organization for this Limited Liabili	y Company were filed on	and assigned 33
Florida document number <u>117000 1144 0</u>		33
This amendment is submitted to amend the following	<u>;</u> :	
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 Linkslite Company "The decimation	e "LLC" on the Jahren inton "LLC"
The first failer was the distribution of the conduction of the		
Enter new principal offices address, if applicable:	605 / WILL	deor Drive
(Principal office address MUST BE A STREET AL	opress) Parklands	FL 33067
	 	
Enter new mailing address, if applicable:	6657 Juin	dsor Drive
(Mailing address MAY BE A POST OFFICE BOX	D 1.1 1	FL 35067
Training marcus in 17 bg 17 cor of rece now	<u></u>	
B. If amending the registered agent and/or r	wistered affice address on our re	ecords enter the name of the new
registered agent and/or the new registered office		enter the name of the new
Name of New Registered Agent:	Mariesa Siegel	
Name of New Registered Algent.		1-
New Registered Office Address:	6657 Windsor Dr	ive
	Enter Florida street	
	Parkland	_, Florida <u>33067</u>
	City	Zip Code
ew Registered Agent's Signature, if changing Regist	ered Agent:	

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the vovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and veept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability mpany 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>Address</u> Type of Action <u>Name</u> _□ Add _□ Remove _□ Change _□ Add ☐ Remove _□ Change □ Add _□ Change D Add □ Remove _□ Change □ Add _□ Remove _□ Change □ Add

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		names(s) here: (Attach additional sheets, if necessary.)	,
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Effective date,	f other than the date of filing:	(optional)	
	n insect the date must be specific and ex inserted in this block does not med tive date on the Department of Sta	cet the applicable statutors, filing requirements after filing.) Pursuant to 605,0207 (3):	(b)
avedinena a circ	in the date on the inchartment of Sta	ate's records.	
the record spe	cifies a delayed effective da by after the record is filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of:	
) , inc 30th de	y arter the record is filed.		
pared Oct	ober 27	2017	
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	Signature of a mer	ember or mahorized representative of a member	
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		Page 3 of 3	
		Filing Fee: \$25.00	