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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I20170000056

Phone : (954)842-2931

Fax Number : (954)842-2936

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 SIBERIAN SPA, L.L.C.

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COVER LETTER

TO: Regi Divis	stration Se don of Cor	ection pocations		
SUBJECT:	SIBERIAN	SPA, L.L.C.		
3000000	 ,	Name of Lin	nited Liability Company	
The enclosed /	Articles of	Amendment and fee(s) are sub	omitted for fiting.	
		ndence concerning this matter	·	
		TERSKA, OLENA		
			Name of Person	
		SIBERIAN SPA, L.L.C.		
		,	Firm/Company	
		957 HARBORVIEW N		
		_	Address	
		HOLLYWOOD, FU 33019	9	
			City/State and Zip Code	
		nanolamination@gmail.com		
			to be used for future annual report no	tification)
For further infe	rmation cu	necening this matter, please of	a[]:	
TERSKA, OLI	EΝΛ		046 255-2848 	
	Nume of	Person		ne Telephone Number
Einefosed is a el	heck for the	e following amount:		
≅ \$ 25.00 Pili	ng Pec	☐ \$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)
Regis Divis P.O.	ng Address stration S ion of Co Box 6327 hassec, F	ection orporations	Street Address: Registration So Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Tallahassee De Street, Suito 810

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

SIBERIAN SPA, L.L.C.				- 1
(Name of the Lin	ited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records,)	
The Articles of Organization for this Limited Plorida document number 1.17000029788	Liability Company	were filed on 02/0	7/2017	and assigned .
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company her	e :	
The new name must be distinguishable and contain the	words "Limited Liabi	Hty Company," the des	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	957 HARBORVII	EW NORTH	
(Principal office address MUST BE A STRE.	ET ADDRESS)	HOLLYWOOD,	FI. 33019	
Enter new mailing address, if applicable:		957 HARBORVII	EW NORTH	
Mailing address MAY BE A POST OFFICE BOX)		HOLLYWOOD, I	FL 33019	
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office s <u>ss here</u> :	address on our rec	ords, <u>enter the na</u>	me of the new registered
	957 HARBORY	TEW NORTH		***
New Registered Office Address:		·	r street address	
	HOLLYWOOL		, Florida_3	3019
		City	, riorida <u>"</u>	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 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>	Name	Address	Type of Action
AMBR	TERSKA, OLENA	957 HARBORVIEW NORTH	-
		HOLLYWOOD, FL 33019	
			二 号Change
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Effective date, if other than the (If an effective date is listed, the date must Nate: If the date inserted in this ble document's effective date on the De	t be specific and cam rick does not meet t	ot be prior to date he applicable su	of filing or usue than	(optional) 90 days after filing.) Pu ements, this date wil	rsuant to 605.0207 (3) Finot be listed as the
he record specifies a delayed effective ord is filed.	edate, but not an e	frective time, at	12:01 a.m. on the c	arlier of: (b) The 90	Oth day After the
Dated	,,	20			
		lera Tersk			

Filing Fee: \$25.00