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Amend

MAY 23 2019 I ALBRITTON

COVER LETTER

UBJECT: Kochuba/ Hardwood Consulting, LLC. Name of Limited Liability Company
he enclosed Articles of Amendment and fee(s) are submitted for filing.
lease return all correspondence concerning this matter to the following:
David V Kochubey Name of Person
Kochubey Hardwood Consulting, LLC
4565 Artesa Way S.
Palm Beach Gardens, FL, 33418 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
David Kochutey at 425, 577-0416 Name of Person Area Code Daytime Telephone Number
nclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

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

TO ARTICLES OF ORGANIZATION OF

Kochubey Hardwood Cov	OCULTING LIC Company as it now appears on our records.) mited Liability Company)		
(A Florida Lin	mited Liability Company)		
The Articles of Organization for this Limited Liability Com Florida document number	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	To The		
	5		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	red office address on our records, <u>enter the name of the new</u> s <u>here</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida street address		
	, Florida		
	City Zip Code		
New Registered Agent's Signature, if changing Registered A	gent:		
provisions of all statutes relative to the proper and comp	d agree to act in this capacity. I further agree to comply with the plete performance of my duties, and I am familiar with and at as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability		

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Nikolay Kachubry	4565 ARTESA WAY S	Add
		Palm Boach Gardens FL 334/8	□ Remove
			Change
			□ Add
		Change	
		Add	
			□ Remove
		Change	
		Remove	
		Change	
		O Add	
			□ Remove
			Change
		C Add	
			Remove
			☐ Change

Effective date, if other than the date of filing: 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) 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.
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:) The 90th day after the record is filed.
Dated May 10, 2019.
Signature of a member or authorized representative of a member
David V Kochubey Typed or printed name of signee

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Filing Fee: \$25.00