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(Requ	uestor's Name)	
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FLORIDA SUBJECT:	FANTASTICA LLC				
	Name of Lim	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	BORIS BRUK				
		Name of Person	,		
	Firm/Company				
	Address				
	MIAMI, FL 33126				
		City/State and Zip Code	<u> </u>	0	
	YOSSELBRUK@YAHOC	D.COM			
	h-mail address; (to be used for future annual report notif	ication)		
For further information	concerning this matter, please ca	u i i:			
YOSSEL BRUK		786 3128471 at ()			
Name	of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for	the following amount:				
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
Regis Divis P.O. 1	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURI Registration Section Division of Corport Clifton Building 2661 Executive Cer Tallahassee, FL 32.	n ations nter Circle		

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Registration Section Division of Corporations

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA FANTASTICA LLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) Lumited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document-number <u>L17000104791</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limit</u>	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or	• the abbreviation "L.I. C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR)	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addre		inter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Floridu street address	
	, Floric	•
	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

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. If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

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Title	<u>Name</u>	Address	Type of Action
MGR		782 NW 42ND AVENUE	D AJd
		SUITE 4	Remove
		MIAMI, FL 33126	Change
MMGR	BORIS BRUK	782 NW 42ND AVENUE	🗆 Add
		SUITE 4	🗏 Remove
		MIAMI, FL 33126	Change
MGR	BEACH TYREX LLC	782 NW 42ND AVENUE	= Add
		SUITE 4	
		MIAMI, FL 33126	Change Change
	·		Change
			🖸 Add
			Remove
			Change
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			Remove
			Change

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

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E. 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)(b) <u>Note:</u> 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.

07/02/2018	12:01 AM		
Daicu			
	Nont		
D	A substance of a member or authorized representative of a member		
		•	
Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00