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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:R	USSian An Name of Limi	VERICATY LA ted Liability Company	<u> </u>
The enclosed Articles of a	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspon	ndence concerning this matter t	o the following:	
	Anastas	1a Gorshkov Name of Person	<u>a</u>
	Russian	AMERICA TV	<u>UC</u>
		V Boy rd a	
	Sunny 1	Sles Beach,	FL,33160
	nastasias E-mail address d	SLLS BLACH, City/State and Zip Code ORShKOVA Obe used for future annual report notified	gnail com
For further information ed	oncerning this matter, please ca		
Anasta Name of	Sia GORShK	O/Q at <u>786</u> <u>400</u> Area Code Daytime	S 93 29 Telephone Number
Enclosed is a check for th	e 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)
Regista Divisio P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssec, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen	tions

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Russian America TV LLC	
(Name of the Limited Liability Company as it now appears on our records. (A Florida Limited Liability Company))
The Articles of Organization for this Limited Liability Company were filed on $11/02/1$ Florida document number 4.17000226801	20/Jand assigned
This amendment is submitted to amend the following:	*******
A. If amending name, enter the new name of the limited liability company here:	ACLAB 17 NOV
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:	₹ To
(Principal office address MUST BE A STREET ADDRESS)	<u></u> 5:
	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, registered agent and/or the new registered office address here:	cnter the name of the new
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
, Flor	rida Zip Gode
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

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 <u>Title</u> **Address Type of Action** AMBR Anastasia GORSHKOVA Suny Isles Beach, FL Remove ☐ Change □ Add ☐ Remove _□ Change □ Add ☐ Remove Change ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

☐ Change

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(If an effec <u>Note:</u> If	e date, if other than the date of filing:) 605.0207 Histed as	(3)(b) the
If the reco (b) The 9	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e 90th day after the record is filed.	arlier of	:
Dated _	11/09/2017		
	Signature of a member or authorized representative of a member	_	
	Anastasia GORShKOVa Typed or printed name of signee	_	

Page 3 of 3

Filing Fee: \$25.00