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SECRETARY OF STATE DIVISION OF CORPORATIONS

N COOPER AUG 1 3 2018

, COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	No limit p	roperty Maintened Liability Company	nance LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	120	Man Malssymal	1019
	No lim	1+ Property M	aintenance LLC
	151 N NO	obhill Road Su	ite 426
	pknthian Nolimitpo	FL. 333241 City/State and Zip Code Coperaty Maintenance to be used for future annual report note	ephotmail.com
Division of Corporations SUBJECT: Name of Lamited Liability Company The enclosed Articles of Amendment and feets) are submitted for filing. Please return all correspondence concerning this matter to the following: Roman Maksymphole			
Aoman Name	Maksymeholk of Person	at (951) 39 Area Code Daytim	1 - 1434 e Telephone Number
Enclosed is a check for :	he following amount:		
\$\$ \$25.00 Filing Fee			☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

No him	ted Liability Company as it now	appears on our records.)		
1.34112 333 3311	(A Florida Limited Liability Com	ipany)		
The Articles of Organization for this Limited I Florida document number	iability Company were filed	on 01/23/2018	and assigned	
This amendment is submitted to amend the fol	owing:			
A. If amending name, enter the new name of	of the limited liability compa	anv 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 appli	cable:	<u></u>		
(Principal office address MUST BE A STREET ADDRESS)		6	33	
			AUG	SE SE
			0F (۲- 20:
Enter new mailing address, if applicable:			- CORI	⊃ Z
(Mailing address MAY BE A POST OFFICE	BOX)	·	Š	у. У.
				<u>~</u>
			- - 2	
B. If amending the registered agent and registered agent and/or the new registered of		ess on our records, <u>ent</u> e	er the name of the ne	<u>:w</u>
Name of New Registered Agent:	ROMAN MAKSYMCHUI	К ——————		
New Registered Office Address:	151 N NOBHILL ROAD S	SUITE 426		
iten isegistered vittle italiess.	En	ster Florida street address		
	PLANTATION	, Florida	33324	
	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 acor removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	John James	151 N. Nobhill Road	\ Add
		plantain FL. 33327 suite 426	Remove
		···	Change
	Emil Chandow		Add
		Plantation FL 33327 soite 426	Remove
		Plantation FL 33327 suite 426	Change
			Add
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	And the standard of the standa	
reffe	e date, if other than the date of filing:	រោរ to 605.02
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not's effective date on the Department of State's records.	t be listed
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	e earlier
fhe	Oth day after the record is filed.	
	August 6, 2018	
ited_	<u>11030 51 61</u>	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00