L18000082326

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OIVISION OF CORPORATION

SEP 2 0 2018

COVER LETTER

	Registration Sec Division of Corp			
e i ii vii v	CCCP DES			
SUBJEC	T:	Name of Lim	ited Liability Company	
The enclo	osed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please rei	turn all correspoi	ndence concerning this matter	to the following:	
		Kyrylo Morekhodov		
			Name of Person	
		CCCP DESIGN LLC		
			Firm/Company	
		6921 Cypress Rd. Apt B-1	8	
			Address	
		Plantation, FL 33317		
			City/State and Zip Code	
		kmorekhodov@gmail.com		
		E-mail address: ()	to be used for future annual report notific	cation)
For furth	er information co	oncerning this matter, please co	all:	
Kyrylo M	Morekhodov		305 842-6986	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	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)

MAILING ADDRESS: 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CCCP DESIGN LLC			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)		
The Articles of Organization for this Limited Liability Compar	ny were filed on April 02, 2018	and ass	igned
lorida document number L18000082326			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liz	ability company here:		
he new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "ELC" or the	abbreviation "L.	L.C."
nter new principal offices address, if applicable:			······
Principal office address MUST BE A STREET ADDRESS)			
			_≘
) SE	PIST STC
nter new mailing address, if applicable:		P -	26 255
1ailing address MAY BE A POST OFFICE BOX)		8	325
	-	3	
		<u> </u>	3.E
. If amending the registered agent and/or registered egistered agent and/or the new registered office address be		er the name	of <u>sthe</u>
Name of New Registered Agent:			
New Registered Office Address:			
<u> </u>	Enter Florida street address		
	, Florida		
	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Oleg Russkov	22 Turgenev Street, Apt. 75	B Add
		Yaroslavl 150054	
			□ Remove
		Russian Federation	□ Change
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
			🗆 Add
		And the same of th	□ Remove
			Change
			D Add
			□ Remove
		 	Change
			D Add
			Remove
			□ Change

Effective date, if other than the date of filing:	
	1: d7
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	432 8FP
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Typed or printed name of signee

Filing Fee: \$25.00