L18000141140

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP		
(Address) (City/State/Zip/Phone #) PICK-UP	(Requestor's Name)	
(City/State/Zip/Phone #) PICK-UP	(Address)	
(Business Entity Name) (Document Number) Opies Certificates of Status		
(Business Entity Name) (Document Number) opies Certificates of Status	(City/State/Zip/Phone #)	
(Document Number) Opies Certificates of Status	PICK-UP WAIT MAIL	
opies Certificates of Status	(Business Entity Name)	-
opies Certificates of Status	· · · · · · · · · · · · · · · · · · ·	
	(Document Number)	
structions to Filing Officer:	opies Certificates of Status	_
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Office Use Only

A. RIVERS



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11/04/22--01015--018 **60.00



COVER LETTER

Registration Section Division of Corporations

ECT:		ited Liability Company	
iclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
return all correspo	ondence concerning this matter	to the following:	
	Steven Kazimirov		
		Name of Person	
	Kapusta LLC		
		Firm/Company	
	1929 NW 40th Court		
		Address	
	Pompano Beach FL 33064		
		City/State and Zip Code	
	stevekaz40@gmail.com	to be used for future annual report note	(Cratian)
rther information c	oncerning this matter, please c	•	neum/n/
1 Kazimirov		561 451-6390 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
sed is a check for the	ne following amount:		
25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kapusta LLC			
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	<u>any as it now appears on our records.</u> Liability Company)	.)	
icles of Organization for this Limited Liability Company document number L18000141140	were filed on $\frac{06/07/2018}{}$	and assigned	
nendment is submitted to amend the following:			
mending name, <u>enter the new name of the limited liah</u>	ility company here:		
name must be distinguishable and contain the words "Limited Liabi	No. Common Valor La Sanakino MITAN	makes the size of the C. C.	
	1929 NW 40th Court	or the appreviation "L.L.C.	
new principal offices address, if applicable:	Pompano Beach, FL 33064		
pal office address MUST BE A STREET ADDRESS)	rompano Beach, Ft. 33004		
	1929 NW 40th Court	0.3	
new mailing address, if applicable:	Pompano Beach, FL 33064		
g address MAY BE A POST OFFICE BOX)	Company Deach, 12 55004		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
mending the registered agent and/or registered office	address on our records, <u>enter t</u>	he name of the new register	
ind/or the new registered office address here:		i,	
N. S.		<u>-</u>	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Flow	rida	
gistered Agent's Signature if changing Registered Agent	•	27 33	
egistered Agent's Signature, if changing Registered Agent by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete the obligations of my position as registered agent as filed to merely reflect a change in the registered office my has been notified in writing of this change.	ree to act in this capacity. I fur performance of my dutics, and provided for in Chapter 605, F	l I am familiar with and E.S. Or, if this document is	
If Cha	nging Registered Agent, <u>Signature of</u>	New Registered Agent	

nding Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added oved from our records:

=	,	1	8	n	a	2	e	r
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t = Authorized Member

<u>N</u>	<u>ame</u>	Address	Type of Action
Oksana Kazimirov		11743 Bayfield Drive	⊡Add
		Boca Raton FL 33498	■Remove
			□C'hange
A	lexander Kazimirov	1929 NW 40th Court	≣ Add
		Pompano Beach FL 33064	□Remove
			□Change
_			□Add
			□Remove
			□Change
_			
			□Remove
			UChange
			□Add
			Remove
			Thange
_			□Add
			□Remove
		<u> </u>	⊡Change

	
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.=	
ive date, if other than	the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(
If the date inserted in thi	is block does not meet the applicable statutory filing requirements, this date will not be listed as the
nent's effective date on th	de Department of State's records.
-1	
rd specifies a delayed effe fled.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
October 31	2022
	Signature of a member or authorized representative of a member
	The state of the s
Steven Kazimirov	
	Typed or printed name of signee

Filing Fee: \$25.00