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COVER LETTER

TO:	Registration Se Division of Cor		·	
SUBJI	VL & Soch	ni LLC		
.,000	EC1.	Name of Lin	nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Rocio Hernandez		
		Extreme Quality Group	Name of Person	
		780 Thorpe Rd. Ste 2	Firm/Company	
		Orlando, FI, 32835	Address	
		extremequalitygroup@ou		
			to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please c	all;	
Rocio	Hernandez		407 9852417 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
≘ \$2:	5.00 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 (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**

VL & Sochi ELC						
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) Limited Liability Company)					
The Articles of Organization for this Limited Liability Company were filed on 06/15/2018 and as Florida document number L18000147796						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limite	ed liability company here:					
The new name must be distinguishable and contain the words "Limite	ed Lightliny Company "the decimation "LLC" or the abbreviation of LCS.					
Enter new principal offices address, if applicable:	See Elabority Company. the designation fleet of the aboreviation 42.1.0.55	# 				
(Principal office address MUST BE A STREET ADDRE	<u> </u>	(구구 <u>한</u> 문				
	<u></u>	2				
	ာ ညီး	· .				
Enter new mailing address, if applicable:	58 S					
(Mailing address MAY BE A POST OFFICE BOX)						
registered agent and/or the new registered office addre	ered office address on our records, enter the name of the ess here: 211 Lomakin	<u>e nev</u>				
V I	28 Downer Road Apt					
New Registered Office Address: 902	Enter Florida street address	 -				
R	Orlando 37977					

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.

City

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>	Address	Type of Action
MGR	PAVEL PETROV		
		9028 DOWDEN ROAD, APT 313, ORLANDO, FL 32827	■ Remove
			Change
MGR	VALERII LOMAKIN	9028 DOWDEN ROAD, APT 313, ORLANDO, FL 32827	= Add
			□ Remove
			Change
			□ Remove
			Change
			Add
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e: If the date inserted in	n the date of filing: ate must be specific and cannot be prior to this block does not meet the applica the Department of State's records.	o date of filing or more than 90 da ble statutory filing requiremen	(optional) ys after filing.) Pursuant to 609 its, this date will not be list	5.026 ed a
record specifies a de he 90th day after th	layed effective date, but not e record is filed.	an effective time, at 12	2:01 a.m. on the earli	ero
ed <u>09 / 13 /</u>	2018	<u> </u>		
	/ I LANGER !	ized representative of a member		