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COVER LETTER

TO	Division of Corpo				
SUBII	ECT:	DA 1	UNITED	LLC	
		Name of Lin	nited Liability Company		
The en	closed Articles of An	nendment and fee(s) are sub	omitted for filing.		
Please	return all correspond	ence concerning this matter	to the following:		
		OL!	EKSII R	OLEWKI	<u>0</u>
		DA	UN: TED Firm/Company	ilc	
			Firm/Company		.
		10213	Merrimae Address	Manoi	du
			Address		
		Rivervien	City/State and Zip Code	33572	
		Unida E-mail address:	11c (a) ajuna	report notification)	
For fur	ther information cond	cerning this matter, please of		•	
0	leksii Ro	ien ko	at(&&5)	382 - 2	237
	Name of Pe	erson	Area Code	Daytime Telephi	one Number
Enclos	ed is a check for the t	ollowing amount:			
\$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy (additional copy is end		\$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

[··· [INITED LLC	
(<u>Name of the Limited Liah</u> (A Flor	ibility Company as it now appears on our records.) prida Limited Liability Company)	
	•	
This amendment is submitted to amend the following:	<u>:</u>	
(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 OG 10018 and assigned florida document number L18000212946. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." Cinter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) The new mailing address on our records, enter the name of the new egistered agent and/or registered office address on our records, enter the name of the new egistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address Florida Florida		
The new name must be distinguishable and contain the words "L	Limited Liability Company," the designation "LLC" or the abbreviation "LLC."	_
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DDRESS)	
Enter new mailing address, if applicable:	7 T	
Matting datess MAT DE A POST OFFICE BOX		_
registered agent and/or the new registered office ac		: nev
New Registered Office Address:		
 	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>	Address	Type of Action
P	Dmytro Cherveniak	10213 Merrimac	= Add
		Manor dr.	□ Remove
		Riverview Fl 33578	□ Change
VP	Oleksii Roienko	10213 Mervinac Manore	dr, o Add
		Riverview FL 3357	Remove □
			■ Change
			🗆 Add
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(If an Note	ctive date, if other than the date of filing:
) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ne 90th day after the record is filed.
Date	d February 20th 2019 Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Ole keji Rojenko Typed or printed name of signee