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COVER LETTER

Divi	ision of Corp	porations		
SUBJECT:	ALEX GOL			
Sobject.	<u>-</u>	Name of Limi	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
Please return	an correspo	ndence concerning ans made	to the following.	
		Alexey Tarasenkov		
			Name of Person	
		ALEX GOLD LLC		
			Firm/Company	
		711 NE 10th avenue unit 1		
			Address	
		Hallandale/FL/33009		
		alexgold848@gmail.com	City/State and Zip Code	,
		E-mail address: (to be used for future annual report notif	ication)
For further in	formation co	oncerning this matter, please ca	all:	
Alexey Tara	asenkov		754 6104178	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling 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

TO:

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

FILED

ALEX GOLD LLC		2018 DEC 13 PM 1: 09
(<u>Name of the Limited L</u> (A F	iability Company as it now appears on ou lorida Limited Liability Company)	TALLAMASSES ETE
The Articles of Organization for this Limited Liabil Florida document number L18000277030	ity Company were filed on 11/30/20	18 and assigned
	<u> </u>	
This amendment is submitted to amend the followir	ng:	
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 designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
		Physida
-	City	Florida Zip Code
Now Degistered Agent's Signature, if changing Degis	Stored Agent	

New Registered Agent's Signature, it 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

It amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	Alexey Tarasenkov	711 NE 10th avenue unit 1	
MGR			
		Hallandale, Fl, 33009	_
			□ Remove
			Change
	Maria Tarasenkova	711 NE 10th avenu	
AMBR			Add
		Hallandala El 22000	L Add
		Hallandale, Fl. 33009	
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in effe	ctive date is listed, the date must be sp	pecific and cannot be pri-	or to date of filing or me	(optional) ore than 90 days after filing.) Pr	irsuant to 605.0207+
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rec	ord specifies a delayed eff	ective date, but n	ot an effective ti	me, at 12:01 a.m. on	the earlier of
The	90th day after the record	is filed.			
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			horized representative		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

ctive date, if other than the date of filing: (optional) effective date, is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 eg. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as meen's effective date on the Department of State's records. ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier one 90th day after the record is filed. december 10 2018	_1					-
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Signature of a member or authorized representative of a member						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00