L18000279582

(R€	equestor's Name)	
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(Ci	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
- (Đơ	ocument Number)	.
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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07/29/21



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COVER LETTER

Division of Cor			
TABANAI	ALLC	•	
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	IVAN BARVO		
	<u></u>	Name of Person	
	RED SQUARE ACCOUN	TING AND TAX LLC	
		Firm/Company	
	6052 TURKEY LAKE RI	SUITE 144	
		Address	 _
	ORLANDO FL 32819		.•
	-	City/State and Zip Code	
	INFO@REDSQUARETAX		<u> </u>
	E-mail address: (to be used for future annual report notific	cation)
for further information e	concerning this matter, please c	all:	 :
IVAN BRAVO		407 717-8150	Telephone Number
Name o	of Person		Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 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 <u>Addres</u>	ss:	Street Address:	

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

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

(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our r Liability Company)	ecords.)		
The Articles of Organization for this Limited I Florida document number L18000279582	.iability Company	were filed on 12/04/2018		and assigned	
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liab	oility company here:			
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the al	obreviation "L.L.C."	
Enter new principal offices address, if appli	cable:	17041 HARBOR OAK P	KWY		
Principal office address MUST BE A STRE		WINTER GARDEN FL 34787			
Enter new mailing address, if applicable:		17041 HARBOR OAK P	; KWY		
Mailing address MAY BE A POST OFFICE BOX)		WINTER GARDEN FL.	34787	-	
				7.5	
 If amending the registered agent and/or gent and/or the new registered office addresses 	•	address on our records, <u>s</u>	inter the nam	e of the new registe	
Name of New Registered Agent:	RED SQUARE	E ACCOUNTING AND TA	X LLC	24	
New Registered Office Address:	6052 TURKEY	LAKE RD SUITE 144			
	· · · · · · · · · · · · · · · · · · ·	Enter Florida street i	address		
	ORLANDO	<u></u>	_, Florida <u>³²</u>	819	
		City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

TABANALILLC

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.

of 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
AMBR	TABANALI RUSLAN	17041 HARBOR OAK PKWY	□Add
		WINTER GARDEN FL 34787	□Remove
			■Change
- -			
			□Remove
			©Change
			□Add
			Remove
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Filing Fee: \$25.00