L19000013202

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Registration \$ Division of Co | | | |
|---|--|---|--|
| | VERLIFE LLC | | |
| SUBJECT: | | ited Liability Company | |
| The enclosed Articles o | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | OLGA DURASOVA | | |
| | | Name of Person | |
| | NEWSERVERLIFE LLC | | |
| | | Firm/Company | |
| | 2700 N 29TH AVENUE - | STE. 109 | |
| | | Address | |
| | HOLLYWOOD, FL 33020 |) | |
| | | City/State and Zip Code | |
| | olga@ newserverlife.com E-mail address: (| to be used for future annual report not | ification) |
| For further information | concerning this matter, please c | all: | |
| OLGA DURASOVA | | 786 617-90-56 | |
| Name | of Person | Area Code Daytin | ne Telephone Number |
| Enclosed is a check for | the 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 Addro Registration Division of 0 P.O. Box 63 Tallahassee, | Section Corporations 27 | Street Address: Registration Se Division of Col The Centre of T | rporations |
| | · | Tallahassee, FI | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limi | ted Liability Company as i (A Florida Limited Liabilit | t now appears on our record y Company) | <u>ds.</u>) |
|---|---|---|------------------------------|
| The Articles of Organization for this Limited L Florida document number $\frac{1.19000013202}{1.19000013202}$ | iability Company were | filed on <u>01/11/2019</u> | and assigned |
| This amendment is submitted to amend the foll | owing: | | |
| A. If amending name, <u>enter the new name o</u> | f the limited liability c | ompany here: | |
| 10 | | | |
| The new name must be distinguishable and contain the v | vords "Limited Liability Co | npany," the designation "LLG | C" or the horevie n "L.L.C." |
| Enter new principal offices address, if applic | eable: no | | 55 3 Ti |
| Principal office address MUST BE A STREE | <u>ET ADDRESS)</u> | | 7.7 |
| | | | - T |
| Enter new mailing address, if applicable: | no | | 9: 1 |
| | | | |
| Mailing address MAY BE A POST OFFICE | <u></u> | | |
| 3. If amending the registered agent and/or i gent and/or the new registered office addre | ss here: | ss on our records, <u>enter</u> | r the name of the new regi |
| Name of New Registered Agent: | OLGA DURASOVA | | |
| New Registered Office Address: | 2700 N 29TH AVEN | | |
| | | Enter Florida street addre | SS |
| | HOLLYWOOD | F | lorida <u>33020</u> |
| | (| ity | Zip Code |

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

NEWSCHOUGH DECITE

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, <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> | Address | Type of Action |
|--------------|-----------------|----------------------------|---|
| MGR | MIKHAIL TERNIUK | 401 N Federal Hwy 316 | □Add |
| | | HALLANDALE BEACH, FL 33009 | = Remove |
| | | | □Change |
| MGR | OLGA DURASOVA | 2693 SW PROSPECT PLACE | ≣ Add |
| | | PALM CITY, FL 34990-7520 | □Remove |
| | | | 2021 Change |
| | | | ا كالأنظى المنظمة الم |
| | | | To Francis |
| | | | © Change |
| | | | □Add |
| | | | □Remove |
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