

Division of Corporations

Division of Corporations
Electronic Filing Cover Sheet

((H22000314637 3)))



H220C031 46373ABC

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : MIACCOUNTING CO
Account Number : 120220000131
Phone : (305)610-2704
Fax Number : (305)547-6040

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

SECRETARY OF STATE
TALLAHASSEE, FL

2022 SEP 12 PM 6:10

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
WORCESTER PZ LLC

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C. BRUMBLEY

Help! 3 2022

Corporate Filing Menu

COVER LETTER

(((H22000314637 3)))

TO: Registration Section
Division of Corporations

SUBJECT: WORCESTER PZ LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EVGENY GODOVIK

Name of Person

WORCESTER PZ LLC

Firm/Company

800 SE 4TH AVE STE 705

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

info@miaccounting.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EVGENY GODOVIK

at (305) 610-2704

Name of Person

Area Code

Daytime 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 Address:Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314Street Address:Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

(((H22000314637 3)))

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

(((H22000314637 3)))

WORCESTER PZ LLC

(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 03/11/2019 and assigned
Florida document number L19000068081.

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 "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

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

(((H22000314637 3)))

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

((H22000314637 3)))

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	DMITRY PAVLOV	800 SE 4TH AVE STE 705	<input type="checkbox"/> Add
		HALLANDALE BEACH, FL 33009	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ALEKSANDR ZAPEVALOV	800 SE 4TH AVE STE 705	<input type="checkbox"/> Add
		HALLANDALE BEACH, FL 33009	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ALEKSEI RIAZANOV	00 SE 4TH AVE STE 705	<input type="checkbox"/> Add
		HALLANDALE BEACH, FL 33009	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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