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EGREPARY OF STATE
ALLAMASSEE, FLORINA

COVER LETTER

TO:	Registration Se Division of Co			
SUBJ	ECT: LKS Rea	al Estate Services LLC		
			nited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			Larissa Smirnoff	
			Name of Person	
			Firm/Company	
			3508 Plume Way SE	
			Address	
			Palm Bay, FL 32909	
			City/State and Zip Code	
		F-mail address: (Ismirnoff001@gmail.c to be used for future annual repor	
For fu	rther information o	oncerning this matter, please co	•	i nouncation)
		Smirnoff	at ()	01-2728
	Name o	f Person	Area Code Da	aytime Telephone Number
Enclos	sed is a check for the	ne following amount:		
¥ S2	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 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

LKS Real E	state Services LLC	
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on June 28, 2019	and assigned
Florida document number <u>L19000170295</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
Larissa Kathryn Smirnoff, LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)		
		1
		SH O
Enter new mailing address, if applicable:		7 2 C
Mailing address MAY BE A POST OFFICE BOX)		요 6
		DA DA
If amending the registered agent and/or registered egistered agent and/or the new registered office address h Name of New Registered Agent:		er the name of the
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zip Code

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

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
			Add
			Remove
			
			□ Add
		····	Remove
			Add
			□ Remove
			☐ Change
			
			□ Remove
			☐ Change
	····		Add
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

. *	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
<u> </u>		
un effective o o <u>te:</u> If the	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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list effective date on the Department of State's records.	i.0207 ed as
record s The 90th	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied and after the record is filed.	er of
ted	August 6 2019	
	Signature of a member or authorized representative of a member	
	Larissa Smirnoff	

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Filing Fee: \$25.00