

L19000283516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

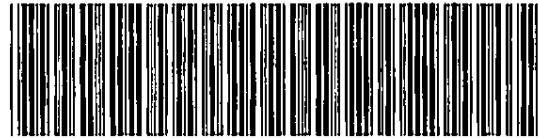
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. SILAS

FEB 14 2022

Office Use Only



100381725071

02/14/22--01033--014 **30.00

FEB 14 PM 1:14
2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Great Shirt Fast 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:

Anton Brilev
Name of Person

Firm/Company

900 Crossing Dr apt 632
Address

Panama City Beach 32413
City/State and Zip Code

indigocreativestudio@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anton Brilev at (850) 708 2726
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

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**

Great Shirt Fast LLC PH 1:1

(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 12/03/2019 and assigned Florida document number L19000283516

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Revolve trans LLC

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)

900 crossings dr, apt 632
Panama City Beach, FL 32413

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

900 crossings dr, apt 632
Panama City Beach, FL 32413

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Daria Grorchakova	900 crossings Dr apt 632	<input type="checkbox"/> Add
		Panama City Beach FL 32413	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Anton Brilev	900 crossings Dr apt 632	<input type="checkbox"/> Add
		Panama City Beach FL 32413	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Renat Khakimov	1610 Fortune ave	<input checked="" type="checkbox"/> Add
		Panama City 32405	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 4th, 2022

Signature of a member or authorized representative of a member

Anton Briler

Typed or printed name of signee