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PARTHENT OF STATE

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S. YOUNG

COVER LETTER

TO:

Registration Section
Division of Corporations

MMTD GR SUBJECT:	OUP LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	TATIANA MITIUKOVA		
		Name of Person	
		Firm/Company	
	4424 Jower PARK RD, A	PT. 1210	
		Address	
	ORLANDO, FL 32814		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
TATIANA MITIUKOVA	4	407 412-3981 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fec & 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 Addres Registration S		Street Address: Registration Se	ection
Division of Corporations		Division of Co	rporations
P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Monro	Fallahassee oe Strect, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 1741

MMTD GROUP LLC		TARBER TI
	ity Company as it now appears on our records.) la Limited Liability Company)	- 50 E
(A Florid	la Limited Liability Company)	AND IN
The Articles of Organization for this Limited Liability (Company were filed on 01/01/2020	TREST E CONTROL OF THE PROPERTY OF THE PROPERT
Florida document number L19000304620		福州 09
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
N/A		
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD)	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florida	a
	Cin	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>	Name	Address	Type of Action
MGR	YEVGENIYA FREDERICKSEN	2670 GROVE VIEW DR, WINTER GARDEN FL 34	.7 _ ≅ Add
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Effective date, if other than the date of filing: 01/31/2020 (optional) 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 605.02077. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. The effective date on the Department of State's records. The 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 rd is filed. The 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 rd is filed. Signature of a member or authorized representative of a member					
Effective date, if other than the date of filing: 01/31/2020					
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Effective date, if other than the date of filing: 01/31/2020 (optional) 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. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. 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 right is filed.					
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Signature of a member or authorized representative of a member	Dated	•	- ·		
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Filing Fee: \$25.00