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Amend

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COVER LETTER

	Registration So Division of Cor			
eno nec	ERC LIDE			
SUBJEC	T:		nited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	um all correspo	ondence concerning this matter	to the following:	
		Rustem Sharipov		
			Name of Person	
		ERC LIDER LLC		
			Firm/Company	
		2145 NE 164TH st, apt 72	0	
			Address	
		North Miami Beach,FL, 3.	3162	
			City/State and Zip Code	
		rustemrsharipov@gmail.co	m to be used for future annual report noti	10 mm - 10 mm
For furthe	er information c	concerning this matter, please e		neation)
Rustem S	haripov		954 9988878	
	Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed	is a check for th	he following amount:		
■ \$25,0	0 Filing Fee	S30.00 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 Addres		Street Address:	
	Registration S Division of C		Registration Sec Division of Cor	
	2 O. Box 632		The Centre of T	•

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ERC LIDER 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 Compa	my were filed on Janu	ary 14, 2020	and assigned
Florida document number L20000020803			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	iability company her	<u>c</u> :	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the des	ignation "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>		
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
	 		
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our rec	ords, <u>enter the name of</u>	the new registered
Name of New Registered Agent:		B1-11-311-7	
New Registered Office Address:			
	Enter Floria	la street address	
	, Florida		
Nam Dagistanad Count'. Simutana if abanaina Dagistanad County	-	2.	ір Соде
New Registered Agent's Signature, if changing Registered Age			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	ete performance of n as provided for in Ch	ny duties, and I am faminapter 605, F.S. Or, if th	liar with and is document is

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
MGR	Rustem Sharipov	2145 NE 164th st.apt 720	■Add
		North Miami Beach, FL, 33162	
			Change
			□Add
			Remove
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Effective date, if other than the (If an effective date is listed, the date mu	date of filir	ng:			(optional)	
(If an effective date is listed, the date mu Note: If the date inserted in this b	st be specific an lock does not	id cannot be prior meet the applica	to date of filing o able statutory fi	r more than 90 day Hing requiremen	ys after tiling.) Pur its, this date will	suant to 605,0201 not be listed as
document's effective date on the E	epartment of	State's records.				
ne record specifies a delayed effection or is filed.	re date, but no	it an effective ti	me, at 12:01 a.i	m, on the earlier	of: (b) The 90	th day after the
Dated April 27		2020				
na,						
Rusten Sharipov	Signature of a	member or authorized	orized representa	tive of a member		

Filing Fee: \$25.00