LZ0 0000 20842

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(D)
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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COVER LETTER

TO:	Registration Se- Division of Cor			
	MINECON	LLC	•	•
SUBJE			•	<u> </u>
		Name of Lim	ited Liability Company	•
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		JAMES EVENSON		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		MINECON LLC		
			Firm/Company	
		1520 NE ORENCO STAT	ION PKWY	
			Address	<u>.</u>
		HILLSBORO, OR 97124		
		JAMESEVENSON@ME.C	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	fication)
For furt	her information c	oncerning this matter, please ca	all:	
JAMES	S EVENSON		503 314-6444	
			at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	ed is a check for th	ne following amount:		
≡ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassee e Street, Suite 810

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

MINECON LLC	2020 SET - 1, ET	. 5: 2¢
(Name of the Limited Liability (A Florida)	Company as it now appears on our records.) Limited Liability Company)	
e Articles of Organization for this Limited Liability Co	-	and assigned
orida document number <u>L2000020842</u>		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limit	ted liability company here:	
new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
ter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRI	ESS)	
nter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered ent and/or the new registered office address here:	office address on our records, enter the	name of the new regist
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:	Enter Florida street address	
	Enter Florida street address , Florid:	a

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>	Type of Action
AMBR	YEVGENIY SERGEYEV	Mkr. Ak-Bulak 2, Sarykengir Lane Bld 3, 5G ([?] # 5: 26 □ Add 26
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			□Change
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ffective date, if other than th	o date of filings		(option	nal)
an effective date, if other than the late must be an effective date is listed, the date must be a listed in this becoment's effective date on the factorial than the factorial date.	ust be specific and cannot be pri block does not meet the app	licable statutory fili	more than 90 days after f	iling.) Pursuant to 605.02
record specifies a delayed effecti I is filed.	ve date, but not an effective	e time, at 12:01 a.m	. on the earlier of: (b)	The 90th day after th
AUGUST 26	2020			
Pated	 ·	<u> </u>		
	Signiture of a member or au EVENSON Typed or pri	nhorized representati	e of a member	

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Filing Fee: \$25.00