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(1115.115	Cm V	OLHĄ &	CO. LLC	•			
SUBJE	CI: _		Name of Lim	ited Liability Company			
Th	1000d 1	-ialou af	Amondment and foods) are sub-	mitted for films			
			Amendment and fee(s) are sub				
Please re	eturn al	l correspo	ondence concerning this matter	to the following:			
			OLGA MAKARENKO				
				Name of Person		· · · · · · · · · · · · · · · · · · ·	
			VOLHA & CO. LLC				
				Firm/Company			
			20185 E COUNTRY CLU	B DRIVE 1202			
				Address	···		
			AVENTURA, FL 33180				
			mbahretdir E-mail address: (City/State and Zip Cod		(DW)	
For furt!	her info	rmation c	oncerning this matter, please ca	all:			
Νio	idi n	(A)	ahretoli nova	at (<u>305</u>)_	6/0	2704 me Telephone Number	
		Name o	f Person	Area Code	Dayti	me Telephone Number	
Enclose	d is a c	heck for th	ne following amount:				
\$ 25	.00 Fili	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is e		□ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is en	tus &

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

VOLHA & CO. LLC

(Name of the Limit	ted Liability Compa (A Florida Limited I	ny as it now appears of Liability Company)	n our records.)	
The Articles of Organization for this Limited L Florida document number L20000031230	iability Company	were filed on 01/24	/2020	and assigned
This amendment is submitted to amend the foll-	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:	:	4000
The new name must be distinguishable and contain the w	vords "Limited Liabil	lity Company," the desig	nation "LLC" or the abb	breviation L.L.
Enter new principal offices address, if applic	able:			0 M
(Principal office address MUST BE A STREE		 -		
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or ragent and/or the new registered office address	registered office a	address on our reco	ords, <u>enter the name</u>	e of the new registered
Name of New Registered Agent:	VOLHA MAK	ARANKA		
New Registered Office Address:	20185	E Count	stolet address	
	Avent	City	, Florida	33180 Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibeing filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as p registered office	performance of my provided for in Cha	γ duties, and I am fa upter 605, F.S. Or, γ	amiliar with and if this 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>	<u>Address</u>	Type of Action
AMBR	OLGA MAKARENKO	20185 E COUNTRY CLUB DRIVE 1202	□Add
		AVENTURA, FL 33180	■Remove
AMBR	VOLHA MAKARANKA	20185 E COUNTRY CLUB DRIVE 1202	□ Change
		AVENTURA, FL 33180	■Add
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	date, if other than the dive date is listed, the date must			to date of fili	ny or more th	opt an 90 days afte	rional) er filine) Pu	rsuant to 605	020
i effecti	the date inserted in this blo	ck does not m	eet the applic	able statutor					
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te: If to cument cord sp	pecifies a delayed effective	date, but not a	an effective t	ime, at 12:01	a.m. on the	e earlier of: (b) The 9	oth day after	
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