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| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Registration Section

| Division of Corporations | | | | |
|---|--|---|--|--|
| ECOTREE | FULFILLMENT LLC | | | |
| SUBJECT: | Name of Lin | nited Liability Company | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | |
| Please return all correspo | ondence concerning this matter | to the following: | | |
| | Ivan Kozupytsya | | | |
| | | Name of Person | | |
| | ECOTREE FULFILLMEN | NT LLC | | |
| | | Firm/Company | | |
| | 7901 4TH ST N, STE 300 |) | | |
| | * | Address | | |
| | ST PETERSBURG FL 33 | 702 | | |
| | | City/State and Zip Code | | |
| | taxpro@taxbyea.com | | | |
| For further information c | oncerning this matter, please c | to be used for future annual report no | tineation) | |
| | enverning and maner, preduce e | | | |
| Ivan Kozupytsya | | 786 3372793 at () Area Code Daytin | | |
| Name o | f Person | Area Code Daytii | ne Telephone Number | |
| Enclosed is a check for the | ne following amount: | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 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 Address Registration S | | <u>Street Address:</u> Registration So | ection | |
| Registration Section Division of Corporations | | • | Division of Corporations | |
| P.O. Box 632 | | | The Centre of Tallahassee | |
| Tallahassee, FL 32314 | | 2413 N. Monro | oe Street, Suite 810 | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 21 JUL 20 AH 10: 55

ECOTREE FULFILLMENT 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 Company were filed on $\frac{02/12/2020}{1}$ _____ and assigned Florida document number 1.20000050354 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 ____

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.

Cirv

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 | | Address 21 JUL 20 AM 10: 55 | | |
|--|-----------------|--|----------------|--|
| <u>Title</u> | Name | Address 21 JUL 20 AM IU: 33 | Type of Action | |
| MGR | VADIM SENKO | 817 NE 2ND ST.HALLANDALE BEACH, FL 330 | 09 □Add | |
| | | | Remove | |
| | | | □Change | |
| MGR DENIS INDYK | DENIS INDYK | UL. TAGANSKAYA D. 8G. MOSCOW RU | □Add | |
| | | | Remove | |
| | | | □Change | |
| MGR | Ivan Kozupytsya | 101 NE 107 STMIAMI SHORES FL 33138 | = Add | |
| | | | □Remove | |
| | | | □Change | |
| | | | □Add | |
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| | | ter change(s) here: (Attach additional sheets, if necessary.) |
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| . Effective date | if other than the date of | filing: (optional) tic and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) |
| (If an effective date Note: If the da | is listed, the date must be specifite inserted in this block does | fic and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 not meet the applicable statutory filing requirements, this date will not be listed as th |
| | ective date on the Departmen | |
| | | |
| the record specific cord is filed. | es a delayed effective date, bu | at not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| David JULY 13 | <u>.</u> | 2021 |
| Dated | <u>'</u> | · |
| | ffre | |
| | Signature | of a member or authorized representative of a member |
| NIK | ITA STOLYAROV | |
| 14117 | | |

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Filing Fee: \$25.00