

L20 000052349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2020 SEP -8 AM 6:33  
TALLAHASSEE, FL

D BRUCE  
OCT 19 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: COMMERCE UNIT 17C LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TREVOR K. BREWER

Name of Person

BREWERLONG

Firm/Company

620 N WYMORE RD STE 270

Address

MAITLAND, FL 32751

City/State and Zip Code

TBREWER@BREWERLONG.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TREVOR BREWER

407

660-2964

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

FILED  
2020 SEP -8 AM 6:34  
TALLAHASSEE, FL

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

COMMERCE UNIT 17C 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 02/14/2020 and assigned  
Florida document number L20000052349.

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) \_\_\_\_\_

PO Box 1001

Loch Sheldrake, NY 12759

**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

City

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	RIADTCHIKOV, ALEXANDER	PO BOX 1001	<input type="checkbox"/> Add
		LOCH SHELDRAKE, NY 12759	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AR	LV, SHIN	190 Hester Street #11	<input checked="" type="checkbox"/> Add
		New York, NY, 10013	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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TALLAHASSEE, FL

2020 SEP -8 AM 6:34  
ALLAHABAD, FL

2020 SEP -8 AM 6:34  
TALLAHASSEE, FL

59

(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 (3)(b)

If 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 record is filed.

Dated September 1, 2020

*Ullrich*

Signature of a member or authorized representative of a member

ALEXANDER RIADTCHIKOV

Typed or printed name of signee