## 62C OCCO 73437

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

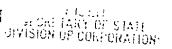
TO:

Div	rision of Cor	porations					
0110 m.c.	BLACKSEA LLC  Name of Limited Liability Company						
SUBJECT:							
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	n all correspo	ndence concerning this matter	to the following:				
		GUSTAVO ROĐRIGUEZ JR					
	Name of Person						
	TAX HOUSE MIAMI INC						
	Firm/Company						
	301 NE 79TH ST STE 2						
	Address						
	MIAMI, FL 33138						
	City/State and Zip Code						
		GUSJR@TAXHOUSEMIA	MLCOM to be used for future annual report no	titication)			
For further i	nformation c	oncerning this matter, please of		and an only			
	RODRIGUE		786 615-2009				
Name of Person		at () Area Code Daytii	me Telephone Number				
Enclosed is	a check for t	ne following amount:					
<b>■</b> \$25.00		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)			
	uiling Addres		Street Address: Registration S	ection			
Division of Corporations			Division of Co	Division of Corporations			
P.O. Box 6327			The Centre of	Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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BLACKSEA LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited L	дарицу Сотрану)	
The Articles of Organization for this Limited Liability Company Florida document number 120000073437	were filed on <u>03/26/20</u>	20 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designa	tion "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:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a	address on our record	ls, enter the name of the new registe
agent and/or the new registered office address here:		
No. 1 of Nove Productional America		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida sti	vant addivars
	City	, Florida Zip Code
	- 1,	λιρ Coac
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	ee to act in this capa	city. I further agree to comply with

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 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 21 MAR -5 PM 2: 53	me e a ce
MBR	CENK GUNAY	5700 COLLINS AVE APT 6C	<b>=</b> Add
		MIAMI BEACH, FL 33140	□Remove
			□Change
			□Add
			Remove
			□ Change
			□Add
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			Change

If amending any other information, enter change(s) here: (Attach additional a	JIVISION OF CORPORATIONS
	21 MAR -5 PH 2: 53
	<del></del>
	<del></del>
effective date, if other than the date of filing:	(optional)
f an effective date is listed, the date must be specific and cannot be prior to date of filing or r  Note: If the date inserted in this block does not meet the applicable statutory filindocument's effective date on the Department of State's records.	nore than 90 days after filing.) Pursuant to 605.0207 (3)( ng requirements, this date will not be listed as the
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. d is filed.	on the earlier of: (b) The 90th day after the
Dated FEBRUARY 23RD \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
omed	
Signature of a member or authorized representative	e of a member
V	e of a memori
IREM DENIZ KARADENIZ	

Typed or printed name of signee