L20000131172

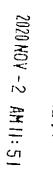
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Office Use Only



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COVER LETTER

TO:	Registration Sec Division of Corp		, w c	• •
SUBJ	ECT: <u>32PEARI</u>		Secretaria de la composición del composición de la composición de	
		Name of Lim	ited Liability Company	
The en	closed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Oleksandr Nikitin		
			Name of Person	
		32Pearls USA LLC		
			Firm/Company	
		10829 NW 62ND CT		
			Address	
		PARKLAND, FL 3307	6	
			City/State and Zip Code	
		nikitinalex@yahoo.com		
For fur	ther information ec	E-mail address: (t incerning this matter, please ca	o be used for future annual re	port notification)
Olek	sandr Nikitin		at (<u>754</u>)	209 8765
	Name of	Person	Area Code	Daytime Telephone Number
Enclos	ed is a check for the	e following amount:		
⅓ \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	Certificate of Status & Certified Copy
	1 -	•	•	
	Mailing Address	· :	Street Add	lress:
	Registration S	ection		ion Section
Division of Corporations			of Corporations	
	P.O. Box 6327			re of Tallahassee
	Tallahassee, F	L 32314	2415 N. i	Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

32PEARLS USA L			
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appea l Liability Company)	rs on our records.)	
he Articles of Organization for this Limited Liability Compan	y were filed on _	05/14/2020	and assigned
lorida document number <u>L20000131172</u>			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited lia	bility company h	<u>ere</u> :	
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the	designation "LLC" or the abl	previation "L.L.C."
nter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			2020
			0 NOV
nter new mailing address, if applicable:			~ .
Mailing address MAY BE A POST OFFICE BOX)			
		- 1	
		<u>-</u> '	<u> </u>
. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our i	ecords, enter the <u>name</u>	of the new registe
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida 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 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	Type of Action
<u>CEO</u>	OKSANA NĮKITINA		□Add
		5150 NW 109TH AVENUE, UNIT 3. SUNRISE, FL 33351	XRemove
			□Change
<u>MGR</u>	OKSANA NIKITINA	5150 NW 109TH AVENUE, UNIT 3, SUNRISE, FL 33351	XAdd
			□Remove
			☐ Change
<u>MGR</u>	OLES NIKITIN	10829 NW 62ND CT PARKLAND, FL 33076	X Add
			Add Remove
			——————————————————————————————————————
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			□Remove
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ective date, if other than the date of filing: ((optional)	
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days te: If the date inserted in this block does not meet the applicable statutory filing requirements	s after filing.) Pursi	uant to 605
nument's effective date on the Department of State's records.	s, this date wat t	ior oc usu
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of filed.	of: (b) The 90tl	i day afte
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ed		
ed 10, 20, 20 Signature of a member or authorized representative of a member	 	

Filing Fee: \$25.00