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Requestor's Name)	_				
Address)	_				
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City/State/Zip/Phone #)	_				
MAIL MAIL					
Business Entity Name)	_				
(Document Number)					
Certificates of Status					
to Filing Officer:	7				
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

ROYAL A	RTIST LLC	. · · · ·	
SÜBJECT:	Name of Lin	nited Liability Company	_
	Amendment and fee(s) are sub	•	
Please return all correspo	ndence concerning this matter	to the following:	
	JONATHAN ASERRAF		
		Name of Person	
		Firm/Company	AMPER-TAL
		Address	
	2020 S = T		
	2020 AUG SECRETA TALLA		
	JA@OFFIXSOLUTIONS. E-mail address:	COM (to be used for future annual report notification)	- 強力 3
For further information co	oncerning this matter, please o	call:	
JONATHAN ASERRAF	:	305 799-1576 at ()	<u>- </u>
Name of	f Person	Area Code Daytime Telephone Nun	nber (+)
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	D Filing Fee, ficate of Status & fied Copy onal copy is enclosed)	
Mailing Addres Registration S Division of C	Section	Street Address: Registration Section Division of Corporations	
P.O. Box 632	•	The Centre of Taltanassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROYAL ARTIST LLC

(Name of the Limited Liability ((A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Corr	and assigned	
Florida document number L20000132661		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
BILAN CONSULTING LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	SS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, enter the nam	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:		36 👱 珂
New Registered Office Address.	Enter Florida street address	11 5
	. Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agen being filed to merely reflect a change in the registered company has been notified in writing of this change.	uplete performance of my duties, and I am) nt as provided for in Chapter 605, F.S. Or,	familiar 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>	Address	Type of Action
AMBR	LLOBELL CARRETER, MAX-EI.	🗆 Add	
		MIAMI, FL 33166	≣Remove
			□Change
AMBR	SEGUIL MONTES, EUROPA E	7950 NW 53RD STREET, SUITE 337	□Add
		MIAMI, FL 33166	■Remove
			□Change
			
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ffective date, if other than the date an effective date is listed, the date must be sp lote: If the date inserted in this block de	ecific and cannot ses not meet the	be prior to	date of filing le statutory	or more than	90 days after fi	lling.) Pursu date will n	ant to 605 ot be list	.0207 () ed as tř)(l
ocument's effective date on the Departr	nent of State's	records.	•	•					
record specifies a delayed effective date	, but not an effe	ective time	e, at 12:01 a	a.m. on the e	arlier of: (b)	The 90th	day afte	r the	
d is filed.									
JULY 30TH	202	n							
•									
TAMILA BUAN	ture of a member	or authoric	and proposes	tative of a me	mbure		<u> </u>		
	are or a memici	77 WHIN111	жа торгозоп	weive OI a III.					
TAMILA BILAN			name of sign		<u>.</u>				

Filing Fee: \$25.00