

L 20000144178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

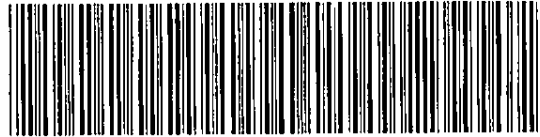
(Document Number)

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2023-14 PM 1:37

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SoftEthica 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:

Christopher M. Walton

Name of Person

SoftEthica LLC

Firm/Company

205 Red Bud Ct

Address

Lake Mary, FL 32746

City/State and Zip Code

chwalton@gmail.com

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

For further information concerning this matter, please call:

Christopher M. Walton 407 619-7327

Name of Person at () Daytime Telephone Number
Area Code

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

SoftEthica 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 May 27, 2020 and assigned
Florida document number L20000144178.

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

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>
AMBR	Mariia Shevtsova	10 Julius Raab Street, Apt. 242	<input checked="" type="checkbox"/> Add
		Linz, Austria PO 4040	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Yurii Lozinskyi	64 Yuriy Savchenko Street, Apt. 37	<input type="checkbox"/> Add
		Dnipro, Ukraine 49006	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Serhii Shevtsov	3 Academica Proskury Street, Apt. 67	<input type="checkbox"/> Add
		Kharkiv, Ukraine 61085	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Iuliia Fedicheva	21 Provulok Zhytloviy	<input type="checkbox"/> Add
		Lugansk, Ukraine 93602	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Olena Sydorenko	59B Raiduzhna Street, Apt. 178	<input type="checkbox"/> Add
		Kyiv, Ukraine 02218	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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)

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2023

CHRISTOPHER M WALTON
205 RED BUD CT
LAKE MARY, FL 32746 US

SUBJECT: SOFTETHICA, LLC
Ref. Number: L20000144178

We have received your document for SOFTETHICA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please complete the areas highlighted on the application for the officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 923A00018611

RECEIVED

SEP 14 2023