

LZO 000148914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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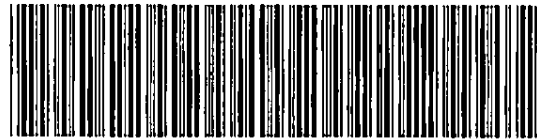
(Business Entity Name)

(Document Number)

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2020-11-13 11:05

C. GOLDEN

NOV 13 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XVERUM 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:

Yuval Kotzer

Name of Person

Xverum LLC

Firm/Company

2801 Greene St, Suite # 2

Address

Hollywood

FL 33020

City/State and Zip Code

Yuval@xverum.us

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

For further information concerning this matter, please call:

Yuval Kotzer

954 665-7442

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

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

Xverum LLC

2020 -5 PM 1:05

(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 06/01/2020 and assigned
Florida document number L20000148914.

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)

2801 Greene St., Suite # 2

Hollywood, FL 33020

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2801 Greene St., Suite # 2

Hollywood, FL 33020

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:

2801 Greene St., Suite # 2

Enter Florida street address

Hollywood

City

Florida

33020

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>
MBR	M.R. LITVENKO HOLDINGS, L1	5911 SHADY OAK LANE, SUITE 3, FORT LAUDEI	<input type="checkbox"/> Add
		5911 SHADY OAK LN, SUITE #3, FL.	<input checked="" type="checkbox"/> Remove
		LAUDERDALE, FL 33312	<input type="checkbox"/> Change
MGR	KOTZER, YUVAL	5911 SHADY OAK LANE, SUITE 3, FORT LAUDEI	<input type="checkbox"/> Add
		5911 SHADY OAK LN, SUITE #3, FL.	<input checked="" type="checkbox"/> Remove
		LAUDERDALE, FL 33312	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<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)

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 October 1 2020

Signature of a member

Signature of a member or authorized representative of a member

YUVAL KOTZER

Typed or printed name of signee