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Registration Section Division of Corporations

TO:

SUBJECT:	133	M DECOR LLC			
SUBJECT.	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
	ondence concerning this matter	-			
		RUSTEM BEISEKEYEV			
	•	Name of Person			
		BM DECOR LLC			
		Firm/Company			
		3821 POND APPLE DR			
		Address			
		WESTON, FL 33332	' :		
		City/State and Zip Code	.,		
		tubin088.mia@gmail.com to be used for future annual report not			
Conforther information		·	(Heation)		
	oncerning this matter, please c		N		
RUSTEM BEISEKEY		954 9558899 ar()			
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for th	ne following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres Registration 5	Section	<u>Street Address:</u> Registration Se			
Division of C P.O. Box 632		Division of Cor The Centre of T	•		
Tallahassee, I			2415 N. Monroe Street. Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	BM DECOR LLC		
(Name of the Limited Liability (A Florida	Company as it now appears Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on	06/05/2020	and assigned
Florida document number L20000153947			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company her	<u>re</u> :	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the de	signation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		·	
Principal office address MUST BE A STREET ADDR	ESS)		
		·	
Enter new mailing address, if applicable:		······································	
Mailing address MAY BE A POST OFFICE BOX)			i
	<u> </u>		
 If amending the registered agent and/or registered 	office addrage on the vo	ande antortho nom	a of the plane periot.
gent and/or the new registered office address here:	office address on our re	cords, <u>enter the nam</u>	© of the new registr
Name of New Registered Agent:	RUSTEM	BEISEKEYEV	
New Registered Office Address:		ND APPLE DR	
	Enter Florida street address		
	WESTON	, Florida	333320
	City		7in 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>	Address	Type of Action
MGRM	MAXIM MUKOMELOV	1305 St Tropez Cir. Apt 2013, Weston, FL 33326	
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ocument's effective date on the Department of S	State's records.		
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record specifies a delayed effective date, but not is filed.	, an effective finie, a	(12.0) a.m. on the earner (n. (b) The 90th day after the
ntedDecember, 22			

Filing Fee: \$25.00

Typed or printed name of signee